



NEW PREPARATIONS.

Vol. 2.

Detroit, January 15, 1878.

No. 1.

Original Communications.

Cascara Sagrado.

BY J. H. BUNDY, M. D., OAKLAND, Cal.

A casual notice of cascara was given in connection with berberis aquifolium in my last paper only because I could not well do otherwise, having used it with berberis in the case reported, and used it because I had so thoroughly tested it in that direction, and wanted nothing better. I always intend to say as little as possible, and let that little be to the point.

In presenting this paper on Cascara Sagrado as almost a *specific* in that most frequent and subtle malady—constipation, it will be necessary for me to refer to the causes of it, and reason how this agent is curative in that direction. Habitual constipation is the only form to which I shall direct attention, as that phase which arises as a symptom of other difficulties, such as obstruction, etc., has no bearing on the subject in hand.

The nature of the diet; deficiency, or a faulty composition of the intestinal secretions; disordered glands that pour their secretions into intestines; impairment of muscular power which leads to deficiency in their propelling power, which may result from nervous or mechanical influences; congestion of the portal circulation; normal secretion of intestinal juices interfered with; deficiency in biliary secretions of a healthy character; congestion of mucous membranes of intestines; and last and the most frequent causes—resisting the calls of nature from carelessness, or circumstances that prevent the obedience at the proper time, etc. The constant habit of taking cathartics is a source of much mischief, and were *we* treated in the manner that the gastro-intestinal tract generally is, we, too, would fail to work, and find ourselves prostrate. I employ a fluid extract of the cascara, using one ounce in a four ounce mixture, in combination with other remedies or alone, as the case may require. It acts upon the sympathetic nervous system, especially upon the solar plexus, stimulating the nutritive and assimilative forces, increas-

ing the digestive processes generally. It acts upon the secretory system in a marvellous manner, especially where the secretions are deficient and perverted, and this seems to be one of its special indications. When you have a case that the constipation depends upon the above conditions,

*R. Fluid extract cascara sagrado, one fluid ounce,
Syrup simplex (or extract malt) } each one fl.ounce.
Aqua,*

M.S., a teaspoonful three or four times daily is all that is wanted to perfectly regulate the want of, and to change the perverted secretions. It acts upon the hepatic secretions and circulation peculiarly, but more positively than any thing I ever gave before; peculiarly, because it produces no impression upon the system in the way of nausea (or derangement of any other functions) pain or inconvenience whatever, and my patients speak of it in the highest terms, as being as nice to take as it is pleasant in its action. Constipation dependent upon defective, perverted or excessive action and secretion of the liver, as above stated, yields at once to its action. It acts as a tonic with the most marked effect upon muscular tissue generally, but more especially upon the stomach and bowels, remarkably increasing the tone and activity of secretion. It is *the* remedy where the tone, as above stated, is deficient, and where it has been produced by constantly taking pills to relieve the constipation, which only is increased by such a measure. This condition is readily changed and a healthy action set up; muscular power and tone restored, and this done, the propelling power or force being regulated. It changes the character of secretions by regulating the action of neighboring visceral glands, as well as those of the upper portion of the small intestines, overcoming congestion of the mucous membrane of the bowels and stomach, completely restoring their tone and muscular power. To *cure* cases of constipation, the result of carelessness, requires perseverance on the part of the practitioner, and a strict course prescribed as to avoiding cathartics, and attention to the calls of nature promptly.

A description of the cascara I am unable to give at this time, but suffice it to say that it is a shrub, and

in due time its botanical name will be known. I combine it, in hepatic troubles with *nux vomica* in proper doses, also with nit. hydro chl. acid dil. in suitable quantities, but more generally give it alone. In bad cases of dyspepsia with constipation

R *Fluid extract cascara sagrado, one fluid ounce,*
Fluid extract berberis aquifolium, one fl. ounce,
Syrup (or extract malt), two fluid ounces.

M. Sig., one teaspoonful, three times daily. In dyspepsia where the food and everything else is thrown up,

R *Fluid ext. cascara sagrado, half to one fl. ounce,*
Fluid ext. berberis aquifolium, one fluid ounce,
Acid hydrocyanic dil., one fluid drachm,
Syrup (or extract malt), q. s.

to make a four ounce mixture. M. S., a teaspoonful after meals and at bedtime. It may be combined in many ways with different drugs, which the practitioner will soon see if he studies the pathological conditions carefully, and I need say no more on this point. It will act as a cathartic if given in one or two drachm doses, but this should never be resorted to if you wish to cure constipation. The dose I have given above does sometimes act so, but I invariably order at first a less dose. When it does not, after five or six days seem to start the peristaltic action, give a little more, but always regulate it so as to fall short of catharsis.

I have written this paper in reply to the many letters received from physicians, asking how *Cascara* may be used, and those who read carefully will find full information. I have not given cases from the fact of their being so numerous, and constipation so prevalent. Will write further hereafter.

I also would state that I do not furnish it to physicians at all. Messrs. PARKE, DAVIS & CO. have prepared a most elegant and efficient fluid extract and will supply all demands.

By permission of the publisher of *New Preparations* I will state that I have changed my location from Colusa to Oakland, Cal. My address is Oakland, Cal.

Yerba Reuma.

BY J. H. BUNDY, M. D., OAKLAND, Cal.

THIS drug will, for the present, close the list of new remedies which I have to introduce to the profession, as I have but one more that I am at present testing, and it will be sometime before a thorough and positive test can be made, so as to bring it into the list with a certainty as to its positive action; and it never will be presented until a complete and thorough knowledge of its use is understood. After months and years of careful study and investigation, and I may say *toil*, for there is no little labor in the careful investigation of an unknown drug, to exactly determine its use in medicine, from the fact that it can only be done by

taking and *giving*, and noting its action upon every system,—the nervous—cerebro-spinal, and ganglionic, and the functions as a whole, over which these systems preside, and so satisfactorily determine this action. With no little pride do I look over the list: *Yerba Santa*, *Grindelia Squarrosa*, *Berberis Aquifolium*, *Cascara Sagrado*, and the last in order, *Yerba Reuma*, and feel that my efforts in this direction have not been in vain, but that the medical profession will have gained *something* in the drug list of which it will gladly claim and accept for the relief of suffering humanity.

The *Yerba Reuma* is a plant, herbaceous, growing near the foothills of the coast-range mountains. It passed out of flower before my attention was called to it, but in due time its name will botanically be obtained. Its Spanish name implies, flowing or flux herb. It contains largely chloride of sodium, and a peculiar astringent. It is only as a local remedy that I have ever tested it. My first test was that upon my friend, Dr. Thomas Porter, who had suffered two years from nasal catarrh. I prepared a tincture, using four ounces of the drug to a pint of alcohol (25°), and gave.

R *Tincture yerba reuma, one fluid ounce,*
Aqua, three fluid ounces.

M. S. Snuff one teaspoonful from the hand through each nostril three times daily. In three weeks Dr. Porter was cured and remains so. He had tried everything recommended with but little benefit. He suggested its use in leucorrhœa. I tried it and the result in every instance was a cure. I gave it in the form of an injection in gonorrhœa, and the result was the same, one four ounce mixture performing the cure.

My friend, and now partner, Dr. C. W. Hansen, carrying on the drug business at the time and being often called upon for something for gleet, put up the same, and in one week the patient reported himself cured. Other cases followed and were likewise cured.

When a case of dysentery presents itself, I shall give it a fair trial in half drachm doses (or of the fluid extract ten minims) every two or three hours; also locally in catarrhal ophthalmia and gonorrhœa. In using it as an injection in gonorrhœa, the urethra should be cleansed with simple water and followed by the injection; in leucorrhœa the same. If desired it may be made stronger, but that is as strong as I have used it. In using the fluid extract two fluid drachms to four fluid ounces water will answer the purpose.

It should be retained by pinching the end of the penis, and withdrawing the syringe for a few minutes. You will find it to excel every other remedy for the above diseases, and this is not likely to constitute its range as a remedy.

I have shipped to PARKE, DAVIS & CO. a very limited supply, and no more can be obtained before July.

Berberis Aquifolium.

BY J. H. BUNDY, M. D., OAKLAND, Cal.

I have two more inveterate cases of syphilis, one called a "cancer" of nine years standing, has been under my treatment six weeks, is fully two-thirds healed, and still healing rapidly,—the patient gaining rapidly in flesh. The other case is now here. When he came three weeks since, the tongue was considerably notched on its edges with ulcers, nose badly swollen and ulcerating, and at this writing the tongue is healed and the nose nearly so, and all swelling gone. The case of so-called cancer presented the following appearance: From the external angular process extending backwards an inch and a-half, and downward to the center of the cheek to the lower margin of the malar bone, a distance of about two inches, the tissues were fairly eaten out nearly to the bone, and the right eye, (for it is the right side) was swollen, shut for many days, and the corroding element was approaching the eye rapidly. At this writing (six weeks of treatment) the swelling is nearly gone and fully two-thirds healed. Have treated them both the same as Mr. Marshall, and I venture to say that in one month more both will be discharged.

Extract of Malt.

By C. HENRI LEONARD, M. D.

FROM the numerous testimonials we have received of the efficacy of this remedy in dyspepsias, and diseases where an easily assimilated food is desirable, we think we are fully justified in ranking malt as one of the most important therapeutical agents. In our own hands it has proven of excellent service. Theoretically it is plainly indicated as *the* remedy in all cases of amylaceous dyspepsia and indigestion, and practically it has proven itself capable of all that theory would claim for it. In the case of myself it has shown itself to be of almost inestimable worth, second not even to pepsine; and right here an important distinction should be made between our *kinds* of dyspepsias. We do not mean to assert that extract of malt will take the place of pepsine in *all* cases, for it will not; as dyspepsias or indigestions calling for pepsine treatment are not amylaceous; neither will amylaceous dyspepsias be as completely benefitted by pepsine, as by the use of the malt extract, and hence, in this case, the pepsine is really inferior to the malt. I am well satisfied of this from the action of the two drugs, not only upon myself, but upon numerous other, and oldstanding cases of difficult digestions.

But, as a necessary sequence, if the stomach is incapacitated for its *full* duties, the resulting mass of decomposing, or fermenting food, be it primarily amylaceous or albuminous, in the stomach will so irritate the mucous membrane as to interfere with the other remaining digestive functions, and hence, in most cases it is best to dispense the malt and the pepsine together. This I have generally done

by using the preparation of pepsine combined with the stomacic and intestinal sedative and tonic, bismuth and strychnia. The elixir of these is the form I usually use, as more easily dispensed, since the powder would not readily solve in the thick malt extract. My most usual prescription is as follows:

R *Elixiris pepsinæ, strychnia et bismuthi, Extracti malti, aa ʒ ii.*

M.S. Teaspoonful to desertspoonful after meals and at bedtime.

It is a good feature in the treatment of most of these dyspeptic, etc., cases to order the bedtime dose, as by so doing you are almost sure to prevent any food remaining in the stomach and upper bowels over night, and hence you relieve a sensitive stomach from what would else be a source of all night irritation.

In cases of recuperation from fevers, or during the run of any acute disease, of course, the combination is easily altered to suit the exigencies that may arise. So, too, in case of using the malt as food, as in the progress of consumption. In these, the proportion of the elixir must be materially lessened, else you would get too much strychnia. In the prescription above written you get 1-120 grain of strychnia at a dose, the elixir being made up so as to furnish 1-60 of a grain of the sulphate, in Parke, Davis & Co.'s preparation, to each fluid-drachm. In consumptive cases I have used with benefit the cod-liver oil and malt combined, with the elixir. In this case, the pepsine present materially aids in the digestion of the oil, as also does the small proportion of alcohol present in the body of the elixir.

But it is not necessary to mention all the variations possible, as to do so would exhaust both your time and patience, since they are as various as the types and phases of disease. What we more especially desire is to impress upon you the great benefit to be derived from these two remedies combined as we have above combined them, for we speak advisedly, and then let your own good judgement suggest any variation that may be further necessary.

Extract of Malt.

BY GEO. S. DAVIS.

EXTRACT of malt, properly prepared from a good quality of malt, is beyond doubt an excellent material, whether regarded as an article of food to build up the strength of a weak patient, or as a therapeutical agent to assist digestion. Let us first examine it in the light of a feeding or nourishing substance. Milk has always been considered the standard article of diet with which to make comparison, and its value is demonstrated in the growth of all young animals, whose entire food and drink it is for a certain period of their existence. It contains about eighty-seven per cent. of water, which is a necessary ingredient when we consider that nearly two-thirds of the human system consists of this element; there is also about three per cent. of fat or butter, required to sustain the respiratory organs

and replace the loss caused by the wear and tear in the fatty portions of the body from muscular exercise. Casein is present in milk to the extent of four and a half per cent., and supplies the nitrogenous matters for the formation of flesh and muscle; four and three fourths per cent. of sugar, producing heat and fat, and lastly we find various mineral salts (three-quarters of a per cent.) used in making bone. Here, therefore, we have a food which gives moisture, oleaginous or respiratory, nitrogenous or flesh-forming, carbonaceous or heat and fat producing, and bone forming material. It is well known that starvation will occur when a person is supplied even with unlimited quantities of such a material as pure starch, which is only carbonaceous and can therefore only supply the needs of one portion of the system.

Now, if we compare extract of malt with milk, it will be noticed that the former contains moisture, sugar, and dextrine and extractive matter (carbonaceous, etc.,) ash (bone-forming) and albuminous matter in the form of diastase and maltin. Before food can be turned to account for the sustenance of the body it must undergo digestion; that is, must be either dissolved or otherwise reduced to such a form that it can be absorbed by the blood, which it accompanies into the lungs to undergo the process of respiration, and thus becoming fitted for the nutrition of the various organs of the body, since these have to be continually repaired at the expense of the constituents of the blood. This is just what the diastase and maltin are able to do—assist the digestion—more especially when brought in contact with the starchy varieties of food, such as bread and potatoes. One part of diastase being able to convert two thousand portions of starch into sugar, a single dose of the extract of malt will most materially aid digestion especially in cases where the secretion of the pancreatic juice is scanty.

Dubraufaut demonstrated in 1868 that malt presents another substance (mentioned above) similar in its effects to diastase, and which he termed maltin. This principle is found to be much more active than diastase, so that with the same quantity of maltin, which a known quantity of malt contains, a very much larger yield of beer is obtained than when diastase is only employed. He also found a second but less active substance, acting with regard to starch in a similar manner to the others, so that in malt extract, which contains all these principles, we have a powerful therapeutic agent.

Another great point which must be borne in mind is that the sugar contained in extract of malt is maltose and not simply grape sugar (glucose). It belongs to what may be called the family of glucoses, but has much more nutritive qualities than any of the other members, and is vastly superior to the ordinary glucose to be met with in commerce, which is prepared from starchy materials by the aid of weak acids and heat. It is even of greater value than that grape sugar which exists in considerable quantities in such fruits as dates, etc., and besides, when

given in this form of extract, has not the objection of being accompanied by the indigestible skin of the fruit. Maltose has often, and perhaps with some show of reason, been confused with the glucose prepared by the chemical process mentioned above, owing to its having the same chemical reaction of reducing cupric salts, in an alkaline solution, to cuprous. Its physical properties are also very similar, but many investigations, which have been carried on in England with much care and great labor, have proven that it is entirely distinct and must stand alone and superior to the other glucoses, especially those artificially prepared—with which we believe the extract to be very liable to be adulterated. It is not necessary to enter more fully into a discussion of this subject, as every one must readily perceive that a substance prepared by mere immersion of the raw material in warm water and allowing the various natural constituents to react upon one another, is infinitely better as a nourishing and therapeutical agent than that obtained by any artificial chemical process, no matter how well or carefully carried out.

Many articles have been written lately on the subject of extract of malt, but the authors have invariably avoided the history of the preparation of the malt itself. We, however, will briefly consider the malting process, as it is essential that only the best quality of malt should be used in the preparation of the extract. The process of malting consists in the germination of the grain by means of macerating in water until it swells and becomes soft. This germination takes place in three well defined stages. First. The grain—barley is preferred on account of its forming sugar in larger quantities than any other grain—is soaked in large wooden cisterns half filled with water (where the diseased seeds will float and may be removed) for a period from forty-eight hours to six or seven days, according to the age of the grain and the excise laws of the various countries. Here the husk becomes exhausted and withered, and a large amount of water is absorbed. When sufficiently soaked, the grain is allowed to drain for eight or ten hours and is then thrown up in heaps on the malt house floor, where it commences to rise in temperature, and the *second* stage begins, viz:—the growth of the germ, shown by the swelling at the end by which it was attached to the stalk. In the *third* period the grain is thrown out on the floor to a depth of from four to six inches, and the plumula or acrospire (the stem of the new plant) and the rootlets are put forth. At the end of about eight days the germination has progressed so far that the plumula has attained a length equal to about two-thirds of the length of the grain, the rootlets to as long as the grain, and about one-half of the starch has been converted into sugar. It is then dried by being heated in kilns, thereby stopping all further growth, and, according to the temperature employed, producing either pale, amber, brown or black malt. It

is necessary in order to be successful that in the process of germination the grain must be supplied with moisture, and kept at a temperature not higher than 130° F., and not lower than 40° F., with access of air and exclusion of light. Good malt should be dry, crisp, and sweet.

Disappearance of a Uterine Fibroid under the use of Ustilago Maidis.

By J. W. WELKER, M. D., LARWILL, Ind.

MISS H., aged twenty-one. Found her with blanched lips, rapid pulse, and fainting from excessive loss of blood. Had been bleeding more or less profusely for ten days. An examination revealed a patulous os, from which blood was oozing. At the internal os the fingers met a rounded protruberance, which was diagnosed as a uterine fibroid. As the unpleasant symptoms from the loss of blood were very great, I at once placed an alum plug against the external os, and administered ustilago maidis and stimulants. The fibroid was about the size of a goose egg, semi-ovoid in shape, and with its rounded extremity presenting at the internal os; it was attached to the left latero-anterior portion of the uterus. It had a broad base of attachment being placed against, or rather with one-half buried in the uterine walls. To prevent as far as possible a further recurrence of the hemorrhage, I gave ustilago maidis in regular intervals and in sufficient quantity to keep up a tonic contraction of the uterus. The patient rapidly improved, and in a short time she was able to be about. She consented to an operation for the removal of the tumor, which I intended as soon as her strength would admit it. Her next *catamenia* passed without any alarming symptoms, and I decided to operate in the succeeding interim. I dilated the uterus with tents in order to make a thorough examination before deciding upon any particular operation, and I was surprised to find that the tumor was reduced fully one-half in size and withdrawn from the internal os. It seemed less firmer in texture, and also less resisting. I advised delay, still keeping up ustilago maidis, and watching in vain for any toxic effects of the drug that might present themselves. At the end of four months, I made another examination by the means of tents, and could detect no sign of a tumor, save a thickening of the uterine walls, where it had been attached. Her present health is good.

I attribute the disappearance of the tumor to the pressure caused by the uterine walls under the influence of the ustilago maidis.

Grindelia Squarrosa.

By D. M. COOL, M. D., CHICAGO, Ill.

SEEING an article in your journal, recommending grindelia squarrosa in hypertrophy of the spleen, and obstinate intermittents, I was induced to try it,

and beg the privilege of reporting the results to the readers of the journal.

CASE I. Mrs. H., aged thirty-eight, was attacked with a peculiar form of intermittent fever; patient suffering two days of each week, (Saturday and Sunday), with chill, not well marked, but high fever, lasting nearly all day, and passing off with perspiration and relief, until the next period came around, which renewed the fever and its sufferings. Patient was weak and rapidly becoming anemic, irregular menstruation, headache, etc., etc. I prescribed half a drachm of quinine, to be taken on Friday, before the expected return on Saturday, and in the interval I put her on the following:

“R *Boudault's pepsine*, three drachms,
Acid muriaticum dil.; fl. one drachm,
Aqua pura, fl. two ounces and a half.

M. Sig. Shake well and take teaspoonful immediately after eating. My quinine failed to arrest the fever, I repeated it in increased doses, continuing the other treatment, until I gave her as high as sixty grains, between paroxysms, or rather, on the day before the return of the fever.

This continued, until I was induced to try cinchonidia, and arsenious acid, each with same results; finally I received a copy of your journal, and was induced to try grindelia squarrosa, and followed Dr. J. H. Bundy's prescription:

“R *Tr. grindelia squarrosa*, two ounces,
Tr. ferri chlor., three drachms,
Syrup simplicis, qs. add four ounces.

M. S. Teaspoonful in water four times daily.”

“R *Quinia sulphatis*, one-half drachm,
Ex. nucis vom., five grains,
M. et ft. pilis, twenty.

Sig. One pill three times a day.”

You will observe I have omitted in my case the leptandrin, not deeming it necessary; and if I was to make the prescription containing the grindelia again, I should leave out the iron, as it makes an unsightly, as well as nauseous mixture, on account of the tannin, contained in the grindelia.

I commenced this treatment on Monday, after having experienced one of the most severe paroxysms on Saturday and Sunday, previous, that patient had suffered from during her sickness; and Saturday and Sunday following, patient was rapidly convalescing, and continued to improve, and at this writing is in the enjoyment of perfect health.

Case two and three are chronic enlargements of the spleen, in both patients. Both had been treated by a number of good physicians; both had had iodine, iodide of potassa, bromide of potassa, counter irritation, etc., etc.—in short, they had been through all the schools of medicine.

I had them simply on grindelia robusta, one drachm of Tr. three times a day, good, generous diet, for about two months, and both are rapidly improving, and express themselves as being nearly well. I had an examination yesterday and found spleen reduced to fully one half, if not one third its size.

Eucalyptus Globulus in Malarial Night-Sweats.

BY W. L. REED, M. D., CERRO GORDO, Ill.,



DURING the last year I have used your fluid extract of eucalyptus globulus with the most happy results. Last May Mrs. A. M. B—— came under my charge, very icterotic and emaciated from excessive night-sweats. Had been treated by a skillful physician with all the usual remedies that he could summon, but to no effect in mitigating her sufferings. I put her upon eucalyptus globulus, one drachm doses four times a day, for two days. Then three times a day for three days, with a remarkable change for the better. Then I made a tonic of eucalyptus and simple elixir, equal parts, and ordered one teaspoonful four times a day. In two weeks time the sweating had entirely ceased. She used the medicine one month, and was completely restored to her wonted health.

Frank H., who had been treated for ten months for chronic ague, icterotic with occasionally night-sweats, was restored to health by first giving him one ounce of Warburg's tincture, to break the chill. Then following it up with one-half drachm doses of eucalyptus globulus, and two drop doses of fluid extract podophyllum every four hours during the day. Four ounces of fluid extract was alone sufficient, but to make sure he was all right, I had this prescription duplicated.

Mr. Z., came to me in November very pale and emaciated, suffering with chills, night sweats and splenitis. I ordered him to take one podophyllin and belladonna pill twice a day, and eucalyptus globulus and simple elixir, equal parts, every three hours for three days, then every four hours for four days, then report to me. He had been treated by the physicians in our neighboring towns for five months with very little improvement. Said that "my medicine had done him more good in one week's time than all the medicine he had taken." He is now well.

I might go on and give a long list of the good results in my practice, but let this suffice.

New Preparations.

THE QUININE-FLOWER (*Sabbatia Elliottii*).—The quinine-flower is an annual from twelve to eighteen inches high, has an erect green stem, linear leaves of about one-half to one inch in length, and small white flowers. The root consist of numerous slender fibres.

It is a native of Florida, and is found most abundantly in flat pine woods, in a moderately dry soil, making its appearance in March or April, and flowering from July to September. The specimens furnished me were gathered three or four miles south of Monticello, in Jefferson County. In the lower portions of the county it is very abundant, and is successfully employed by those living in its vicinity for the cure of different types of malarious fever, the whole plant being used,

either in the form of decoction or extract, and given *ad libitum*, or until the patient feels the effects of quinine in his head. It is a curious fact that persons brought under the influence of this remedy experience similar sensations—such as tension or fullness in the head, ringing in the ears or partial deafness—as when under the influence of Quinia, and hence its name. Its reputation as an anti-periodic was established during the late civil war, when, owing to the scarcity of Quinia, every opportunity was offered for testing the relative value of various substitutes.

The Quinine-flower is intensely and permanently bitter, yielding its properties to water and alcohol. A saturated tincture in doses of one teaspoonful every two hours was found sufficient to break the paroxysm of intermittent fever. Larger quantities, however, may be given in obstinate cases, or in the remittent form of the disease.—J. Dabney Palmer, M. D., Monticello, Florida, in *Journal of Pharmacy*.

THUJA OCCIDENTALIS.—We have recently received a number of queries relative to the nature and uses of the arbor vitæ, and in our last number we gave formulæ for its preparation. Since then we have solicited from Dr. James R. Leaming, of this city, some information regarding it, and have received in reply the subjoined memoranda. Dr. Leaming is by no means an enthusiast concerning the value of the remedy, and does not claim for it any extraordinary powers, but he has for some years past been accustomed to use it occasionally, and says concerning it as follows:

"The fluid extract or saturated tincture may be given in drachm doses from three to six times daily.

"It may be given for malignant disease or for pulmonary hemorrhage in a glass of milk or in cod-liver oil.

"It may also be applied to cancerous ulcerations or tumors. It may be applied in the cavity—in the os—or to the cervix of the uterus in malignant disease, or in non-malignant, when there is a flabby condition of the parts with a tendency to bleed; and also, under the same conditions, to the throat. It may be applied to warts, and especially to venereal warts.

"It may be given in amenorrhœa from simple causes, but does not affect a healthy gravid uterus.

"The elixir of thuja and glycerine is a more elegant mode of administering the medicine, and is a valuable substitute for cod-liver oil.

"The glycerole may be made into suppositories, or it may be mixed with the fluid extract, for application to the os uteri upon a pessary of cotton.

"This medicine may become very useful to the practitioner in the treatment of malignant disease, especially in diminishing tendencies to bleeding and rapid progress of the local disease. It also relieves the violence of pain. In some cases the disease has disappeared under its use—not always.

The literature referring to this drug is quite limited. A Kawalier, of Vienna, discovered a bitter principle, which he called *pinopicrin* (found also in *Pinus sylvestris*), a volatile oil, sugar, gelatinous matter, a variety of wax, resin, and tannic acid (*Chem. Gaz.* Feb. 1, 1855, p. 45); and more recently a peculiar crystallizable coloring principle, which he termed *thujin*, another yellow substance, which he called *thujetin*, and still a third, *thujigenin*; also a variety of acid, which he named *pinitannic*. Kawalier's second paper in the *Chem. Gaz.*, Nos. 392–3, pp. 61 and 68, 1859, is said to contain a full description of the processes he employed.

Regarding the properties of Thuja, the wood

when burnt gives off an agreeable smell, which led to its former use for sacrificial purposes. A salve made with the leaves used to be a remedy employed by the Indians for the relief of rheumatism, and a poultice of the leaves made with milk has been highly spoken of for the same purpose. By distillation the leaves yield a yellowish-green volatile oil, which has been used as a vermicide. Boerhaave praised the action of the distilled water as a remedy for dropsy.

Some years ago Dr. Leaming contributed to the *N. Y. Journal of Medicine* (N. S., xiv., 406), a paper on the use of thuja in affections believed to be cancerous, and in venereal excrescences, and in 1856, in the same journal, Dr. Benedict recommended the strong tincture as an emmenagogue.

Thus far thuja appears to have been employed empirically only, but it would seem, on reviewing the affections in which it had been of service, that its action may be explained by a property somewhat similar to that possessed by ergot, namely, of causing contraction of unstripped muscular fibres. This would explain, in some degree, its alleged power of controlling capillary hemorrhage, and the growth of vascular tissues like cancer and condylomata.—*New Remedies*.

MALT AS AN ANTISCORBUTIC.—Considering the exhaustive nature of the evidence produced before the Scurvy Inquiry Committee as to the relative merits of different antiscorbutic articles of diet, it is surprising no reference was made to the excellent antiscorbutic properties of malt. This property was known and fully valued by the Elizabethan mariners, for we learn from Hakluyt that hogsheads of ale were considered important adjuncts in victualing a ship in those days. Glauber, the celebrated chemist, in a tract, entitled "Consolation for Mariners," written about the beginning of the seventeenth century, strongly advocates the claims of malt, or sweet wort, as a preventive and a remedy for scurvy. It is probable, in these degenerate days of light bitter ales, beer sufficiently good to stand a prolonged sea-voyage and changes of climate could not be supplied to ship-owners at rates moderate enough to enable them to issue it as a daily ration to their crews. The abundant supply of bottled ale and stout, which is generally to be found in the "cabin," is perhaps one of the chief reasons why the officers on board scurvy-stricken ships are almost exempt from the disease. But if good ale is too expensive an article to be supplied to the crew, the same can not be urged against the various preparations of malt. Dr. Ralfe, who has recently tried malt extract in a case of scurvy under his care at the Seaman's Hospital, found the patient improved considerably from its administration, in spite of his being kept on strictly "scorbutic" diet. Although malt extract is inferior as an antiscorbutic to lime-juice and potato, still its powers in this respect are undoubtedly very high, and it would be a most useful addition to the otherwise scorbutic dietary of the common sailor. Malt extract is extremely palatable, and persons who are in the habit of using it get to like it exceedingly. An infusion of malt, to which perhaps a little extract of hop is added, would, we are sure, speedily become a favorite brew in the fore-castle. Malt extract is very portable, and can be easily packed; a great advantage to travelers, who carry it either in jars in the liquid state, or in the solid form as compressed malt in blocks, or made up into lozenges.—*Lancet*.

MALT EXTRACT AS AN EMULSIFIER.—Professor Geo. F. H. Markoe recently called attention

to malt extract as an emulsive agent for cod-liver oils and other oleaginous preparations. At the present time, when cod-liver oil is extensively employed as a therapeutical agent, anything that will neutralize or overcome its disagreeable oily character and bad taste, will be welcomed by patients. Extract of malt possesses the power of producing a perfect emulsion with cod-liver oil, and a mixture of equal parts of cod-liver oil and extract of malt was exhibited, having a semi-solid consistence, in which the taste of cod-liver oil was more perfectly concealed than can be accomplished by any other known process.—*Boston Medical and Surgical Journal*.

COTO BARK AND COTOIN.—The extraordinary powers ascribed to this comparatively new remedy, in arresting and curing intestinal catarrh, dysentery, and diarrhœa, in their various modifications, appear to have received renewed confirmation through the experiments made with it by Drs. Burkard and Rieker in the Ludwig's Hospital at Stuttgart. The remedy was employed by them in the shape of powder, at tincture, and in the form of active principle, cotoin. The powdered bark, when placed on the tongue, has a sharp aromatic taste, which soon increases in intensity, and becomes very disagreeable. It increases the flow of saliva, and its effect is felt for some time after it has been removed from the mouth. Doses of 0.5 gm., given internally, generally produce a burning sensation in the stomach, and very generally eructations and vomiting, making this form of exhibition undesirable. Nevertheless, in one case, where the patient retained a single dose of 0.6 gm. (9.2 grains), all gastric catarrh disappeared in two days. The effects of the tincture (1:9) are even more disagreeable than those of the powdered bark itself; it is very difficult to make patients take the remedy after they have once experienced its unpleasant effects. These latter, however, are mainly caused by constituents of a resinous character, as well as by an essential oil, in which the peculiar specific action of the remedy is not believed to reside. The employment of the active principle, cotoin, therefore removes all obstacles which might otherwise cause the rejection of the remedy. In the first place, only very small doses are necessary to produce the desired effect, and besides no secondary disturbances of any kind, nor any disagreeable sensations are produced by it. According to the investigations of Jobst, cotoin must be classed to the so-called indifferent principles; and it is not only "indifferent" chemically, but even physiologically; for on administering it to animals, not the slightest change of any physiological functions could be observed, even in doses of one gramme. This absence of toxic effects is no doubt a great advantage, in comparison with those remedies upon which we mostly rely in such diseases, namely opium and lead. Although cotoin may seem to be much more expensive than any other antidiarrhœic remedy, it is not so in reality, for only very small and infrequent doses need be employed. Eleven cases of gastric catarrh and diarrhœa have been treated with the remedy, of which 0.05—0.08 gm. were dissolved in 120 gm. of distilled water, to which ten drops of alcohol were added, and the solution mixed with thirty gm. of syrup. A tablespoonful was administered hourly. Some of the cases were of old standing, some were very severe attacks of cholera morbus, and a number of them had either been but little benefitted by opium, tannin, or lead acetate, or not been bettered at all. The above mixture produced speedy improvement, generally in a few hours, and complete

recovery in from twelve hours to six days.—*Buchn. Repert. f. Ph.*, 1876, 520.

COTO BARK.—About five pounds of this bark were forwarded to Dr. Wittstein by the house of Rudolph Martins, in Hamburg, with the following information: "This bark is from the so-called missions in the interior of Bolivia, whence also cinchona bark is obtained, and costs about the same price. It is recommended in the form of a powder or alcoholic extract for diarrhœa and colic, also for neuralgic toothache; externally as tincture, for rheumatism and gout." It occurs in pieces from two to three decimeters long, and from eight to fourteen millimeters in diameter. Externally it is reddish-yellow cinnamon brown, internally, darker. The very aromatic smell recalls cardamoms, camphor and cinnamon. The taste also is aromatic and faintly bitter, but neither mucilaginous nor astringent.

Dr. Wittstein found in the bark (1) A volatile oil, pale-yellow, of a powerful aromatic odor, and biting, peppery aromatic taste, lighter than water. (2) A volatile alkaloid of a briny and urinous smell, resembling propylamine or thrimethylamine. (3) A soft resin, yellow-brown, aromatic in odor, of a biting taste and a pitchy consistence, which it retains even after many weeks' exposure to the summer air; it is easily soluble in ether, chloroform, alcohol; difficultly soluble in benzol, scarcely soluble in carbon bisulphide. The solutions have an acid reaction. It dissolves freely in ammonia and the fixed alkalies, and is reprecipitated from such solution by acids; it forms about fourteen per cent. of the bark. (4) A hard resin, dark-brown, brittle, inodorous, and tasteless, somewhat bitter in alcoholic solution; easily soluble in alcohol (the solution has an acid reaction), insoluble in ether, benzol, chloroform, carbon bisulphide; easily soluble in alkalies, and reprecipitated by acids. It forms about ten per cent. of the bark. In addition to these, the bark contains, starch, gum, sugar, oxalate of calcium, iron-greening tannin, formic, butyric, and acetic acids. Dr. Wittstein is of opinion that a tincture of the bark will be the best form of administering it—one part of the coarsely-powdered bark to nine parts of rectified spirit. A tincture of this strength was accordingly used by Prof. von Giek in seven cases of diarrhœa, and the powder in eight other cases. Ten drops of the tincture were given every two hours, and of the powder half a grain four or six times a day. From his observations, Dr. von Giek concludes that coto bark is a specific against diarrhœa in its various modifications.

No experiments are reported of attempts to prove the reputed efficacy of the bark in rheumatism or gout.—*Archiv der Pharmacie*.

TINCTURE COTO BARK.—This tincture, prepared from a Peruvian bark, has been used by Dr. Mader as a remedy for diarrhœa in some thirty cases. It is given in doses of ten drops once in two hours up to as high as ninety drops in a day. Owing to its acrid taste it should be given diluted with water, and extract of liquorice should be added. It proved itself a good astringent in the cases mentioned, but not equal to opium. It will require further experience to determine whether it will have special value in the diarrhœas of children, where it is undesirable to give opium.—*Bericht der k. k. Krankenanstalt Rudolph Stiftung, in Wien*, 1875.

COTO BARK IN DIARRHŒA AND RHEUMATISM.—This new bark, from Bolivia, is said, by Professor Giete, of Munich, to be a specific against diarrhœa in its most diverse forms. He administers it in doses of 0.5 gramme of the fine powder four or six times a day. Of the tincture, he usually gives ten minims every two hours. In Bolivia, whence the plant was sent, it is regarded as a remedy against rheumatism and gout.—*The Medical Brief*.

BROMIDE OF CAMPHOR.—Numerous facts observed by foreign and French physicians in hospitals or in private practice, show most evidently that bromide of camphor exerts a sedative action on the nervous system, and that it will be of great service in the treatment of nervous disorders which accompany affections of the respiratory organs, of the heart and of the urino-genital organs.

Heretofore it has been impossible to prepare a syrup of bromide of camphor, and the preparations which have constantly been employed by French physicians in the treatment of cases mentioned in this article are Dr. Clin's capsules and dragees. They are most carefully prepared. The capsules contain each four grains, and the dragees two grains of bromide of camphor. The consequence of this is that the physician can, with security, graduate the doses according to circumstances. According to Dr. Pathault, they can be used indistinctively, but when prescribed in large doses the use of capsules will be found preferable, especially as they are small, and are covered with a thin coating of gluten which dissolves rapidly in the stomach.—*The Medical Brief*.



Correspondence.

Ustilago Maidis. Not long since I was called to take charge of the case of a lady in labor with a third child. She had been in labor for 24 hours before I saw the case. The attending physician, a homeopathist, proposed to give chloroform and deliver with forceps, hence the change of physicians. This change took place in early morning; on making an examination, I found but very little progress of the child, not enough to tell what the presentation might be; pains about thirty minutes apart, and but light at that—yet my predecessor had proposed instruments (proposed *death*, I think). I proposed to wait and see what nature would do in the case. At about the middle of the afternoon, (as things remained in statu quo,) I commenced the administration of fld. ext. *ustilago maidis* in 3i doses every hour. This brought on very efficient pains, and at about eight o'clock P. M. the woman was delivered of a large healthy child. The action of the *ustilago* was very different from that of *ergot*; between pains the woman was at *perfect ease*, not so with *ergot*, as every physician knows. No more *ergot* for me in such cases! Give me *ustilago* before forceps or *ergot* either.

DR. W. C. PARAMORE.

VALPARAISO, Porter Co., Ind., Oct. 9, 1877.

Dr. Younkin has been using *ustilago maidis* in the treatment of hemorrhoids with success. His plan has been to inject the tumor with the remedy by means of a hypodermic syringe. He adds a few drops of carbolic acid to the injection mixture. He says he prefers the action of *ustilago* when thus used, to that of *ergot*.

I desire the profession to know the value of *grindelia robusta* in asthmatic affections, as proved in my own, and other cases.

My age is 39,—robust constitution, weight 190. For seven years, commencing in July or August, and terminating in October or November, I have been afflicted with hay asthma. From July 14th to August 1st, 1876, my distress was greater than ever before—I was obliged to sit in a stooping posture every night; could not even rest my shoulders against the back of the chair, though I was able to attend my usual business during each day. I had made use of every remedy known to the profession, but without satisfactory results. Those only, who have experienced such distress, can imagine my suffering.

My attention was called to *Grindelia Robusta*, by my friend Dr. Leonard. As no dose was specified, I prepared the following:

℞ *Fluid extract grindelia robusta* ʒi
Syrupi simplicis f ʒiij

M. One teaspoonful at the commencement of a paroxysm gave complete relief in from three to five minutes. Continued the remedy (same dose) three or four times daily, for a few weeks. The "season" of 1877 has passed with only a slight attack. Only a few doses required to give complete relief.

I will give another case. Frank L., aged 8 years—afflicted with asthma from birth—worse from July to October. Complete cure effected by using two prescriptions as above. Have prescribed it in other cases with similar results.

R. WILSON WALTERS, M. D.

CHAGRIN FALLS, Ohio, Dec. 20, 1877.

I have been using several new remedies during the past year and have not been disappointed in any that I have tried. I had one patient who had by sexual abuse become partially impotent. One four-ounce bottle of fluid extract of *Damiana* perfectly restored his sexual powers.

W. H. DICE, M. D.

COLOMA, Mo., Nov. 15, 1877.

I have used the fluid extract of *Damiana* of Parke, Davis & Co. in my practice in drachm doses, and find it to be a tonic in impaired action of the generative organs. One patient said he had not had an erection of the penis for three years. By taking fl. ext. of *Damiana* he had regained all erective powers. It acts powerfully on the kidneys. I think a half-drachm doses, three times daily, sufficient.

R. L. BLAKELEY, M. D.

ROCKFORD, Mich., Nov. 6th, 1877.

Allow me to say that I have used your new preparation "*Guarana*" for sick headache with most decided success, having given relief in one case for full three months, where for about fourteen years one to three attacks were looked for each week.

W. D. RANKIN, M. D.

ALLEGHENY CITY, Pa., Nov. 28, 1877.

I have for the past year been in receipt of your journal *Berberis Aquifolium*. NEW PREPARATIONS, and found it quite valuable. Have been using *Berberis* for cutaneous diseases with success, and find *Yerba Santa* valuable in chronic bronchitis, particularly in old people.

If there is asthmatic breathing *Grindelia Robusta* assists materially.

I am now prescribing *Cascara Sagrado* for constipation; cannot as yet testify to its effects, not having had time.

Cactus Grandiflorus I find useful in functional disturbance of the heart.

Eucalyptus Globulus I have tried for the past two years, but do not find it efficacious.

ST. LOUIS, Nov., 1877. W. A. WILCOX, M.D.

* * * We need a journal devoted exclusively to the introduction of new remedies, and the publication of all that is known in relation to them. I am now prescribing a pill composed of phosphide zinc 1-10 gr. and *nux vomica* ¼ gr. The patient complains of a burning in the stomach and its cardiac orifice. Whether the pills cause it or not I have no means of knowing. I stop them occasionally, not knowing but they do.

Salicylic Acid is another new remedy we need more information about. There are complaints made as to its causing disagreeable sensations in the stomach and in its cardiac orifice. To avoid this I have been giving a prescription as follows:

℞ *Glycerine* aa } ʒiij
Aqua dist. aa }
Salicylic acid 3 iij
Bicarbonate soda 3 iij

This being well mixed is used in doses of a table-spoonful every two or three hours. I am not pleased with this formula, and yet know not how to better it. It would be pleasing to me for someone to write articles for your journal, giving the best modes of administration, and the full effects of these remedies. Can you, or someone of your friends, get time to do this?

WET GLAIZE, Mo., Nov. 22, 1877.

W. M. DODSON, M. D.

* * * I am using several of **Salicylic Acid.** your new preparations and am well pleased with the results thus far. I also think every doctor in the land should read your little gem of NEW PREPARATIONS, who wishes to keep up with the times.

I hope you received my order and *stamps* for 1878. I have just had a very severe case of articular rheumatism acute, for which I prescribed Salicylic Acid in twenty grain doses, every two hours, in combination with bicarb. soda and glycerine, which relieved my patient of pain in two or three hours. I don't think I ever saw anybody sweat more freely in my life than he did after taking the fourth dose; as soon as the perspiration was fully established all the pain ceased, and has not returned at this writing, third day. One objection I find to the elixir salicylic acid is, there is not enough of the medicine in a fluid 3. Just think, you must give 3 ii ss. at one dose to get gr. xx, which is too large. Please excuse my criticism.

I think your **Dialyzed Iron** much superior to the old Chlor. Tr. of Iron, at least it has given me full satisfaction in regard to its therapeutical effects, to say nothing of its pleasantness to take.

I have not yet tried "Jaborandi," but will do so soon.

W. M. CAMPBELL, M. D.

EATON, Ohio, Nov. 23, 1877.

I am much pleased with your **Potassa Fusa.** efforts to lay before us new remedies. Old medicines used in a new way amount to about the same thing as new ones; accordingly I offer you Potassa fusa, of the U. S. Pharmacopœia, and present myself as the first patient on which I tried it. Having been a sufferer for many years with chronic rheumatism, of the sciatic form, which at times incapacitated me for labor, and knowing well the long continued course of medication necessary to remove it, as usually prescribed in our standard works on the practice of medicine, I determined to seek something new. Accordingly I put a drachm of caustic potash in a quart of soft hot water and had the entire surface of my body thoroughly sponged with it. I did not take a single grain of medicine internally: the only thing I did in addition to the sponging was to wet a piece of flannel in a solution of caustic ammonia and apply to the most painful parts. This simple course in three days time effected a cure. My friend, Dr. Browning, who has long been a sufferer with chronic rheumatism of the joints, upon my recommendation, tried the same course, and informs me that the first application gave him entire relief. If you think worth while to publish these cases do so.

I have tried the fluid extract **Eucalyptus Globulus.** tract Eucalyptus Globulus in two cases of intermittent fever with success; so far I am well pleased with it.

J. W. HAWKINS, M. D.

CANTON, Lewis Co., Mo.

Having read with considerable interest favorable reports of many of the new remedies published in your medical journal and sent broadcast over the length and breadth of this country, was induced, as many others have been, to test the claims of several of them to the attention and confidence of the profession, and now being able to speak from personal observation and experience relative to their reliability, am happy to add my testimony in favor of their therapeutical value and merit.

The Chlor-Anodyne is a choice compound possessing superior merits as a remedial agent in diseases for which it is recommended. I have particularly tried it in neuralgia, after other remedies had been given with little or no benefit, and it has acted like a charm, subduing all pain and inducing a quiet placid condition of the system without any of those objectionable conditions following the use of many of our more common anodynes. I think it would be quite difficult to supply its place by any other article, or compound, known to the profession.

The Extract of Malt, with its various combinations, coming from the laboratory of Parke, Davis & Co., merit, as I believe, much commendation. Of that preparation, combining pyrophosphates of iron and quinine, I can more particularly speak, having tested the remedy to my entire satisfaction in well marked cases indicating its use, only one of which I will attempt to give in this connection. A young gentleman, employed as clerk in one of the wholesale dry goods establishments in this city, had been running down for a considerable time till he became too feeble and debilitated to perform the duties of his position, although he had tried tonics and the ordinary remedies in such cases with little or no benefit. Under these discouraging circumstances I put him on the use of the above compound; a change for the better was produced in his condition at once, and his recuperation was rapid, and restoration to health and strength perfect, all of which was accomplished in a much shorter time, and more effectually than I think could have been done by any other remedy with which I am acquainted.

The Yerba Santa, so favorably noticed and ably commented upon by contributors in your journal as the remedy par excellence in those long standing chronic, laryngeal and bronchial difficulties, that seem to baffle our skill, and resist the curative properties of the most popular remedies of the day, has proven of such singular efficacy in several well marked cases of throat and lung trouble under my observation, that I think it entitled to more than a passing remark in this place.

I am happy to bear testimony in favor of the anti-periodic properties of the **Gentiana Quinquiflora.** In its administration I have seen results more favorable in the removal of chills and fevers than those of quinine, and especially in debilitated conditions of the system from hepatic and bilious complaints its alterative and tonic properties seem to be admirably adapted for bringing about a favorable condition in the shortest time and best manner of any of our remedial agents in such cases. No doubt but this article, though but recently introduced to the notice of the medical world, is destined to occupy a high place among the best remedies in bilious and liver complaints known to the profession.

Several of the other new remedies I have used with results more or less favorable, but not to such an extent as to enable me to report satisfactorily on the result in this number of the journal.

Promising at some future time additional facts, I close with an apology for the length and many imperfections of my communication.

DETROIT, Dec., 1877. A. HARLOW, M. D.

The gelatine-coated pill
Gelatine-Coated Pills. that has recently acquired favor with our profession needs a more careful investigation of its solubility than it has hitherto received by those who are experienced in its use.

Like all new preparation of drugs they are heralded over the country as the best known, and improved preparation that has ever been offered in any market. I have used the gelatine-coated pill in Dispensaries as well as in private practice, and have concluded that while the pill in many instances is all that is claimed for it, in many others it is not what we are asked to believe, *i. e.* readily soluble in the stomach. I have given the gelatine-coated cinchonidia pill, and have seen it after remaining in the alimentary canal 24 hours, pass from the patient with the gelatine unremoved from the mass. A brother physician said to me that he had given a gelatine-coated anti-periodic pill for a considerable time, and at short intervals, without any noticeable effects; when upon examination of his patient he found to his "disgust that the pills were passed without being dissolved." That the solubility of the pill should be more carefully studied by our profession before it is used further, I think, many will agree with me.

CHICAGO, Nov. 28, 1877. W. F. LEWIS, M.D.

In the October number of your journal I notice under the heading "Substitutes for Quinine" some remarks about sulph. cinchonidia by Dr. Wright, of Troy. I used it extensively for some and at first did not have as good success as I could wish. I have also used nearly two thousand pills of Carbazotate (Picrate) of Ammonium, and at first this "substitute" in a measure failed, but since I have used both of the above named, in conjunction, I have had as good success as I ever had with quinine, and in a great proportion of cases, better. My plan has been to give them alternately, four hours apart, say for an adult, five to eight grains of the cinchonidia to commence, and two pills of carbazotate four hours after, so regulating the alternation that the patient shall take the pills during the fever. I have in the majority of intermittents found six powders and twelve pills to accomplish a cure, with less liability to a return than if treated wholly with quinine. The pills I used were half-grain, manufactured by Parke, Davis & Co. Since I have adopted this mode of treatment I have had no complaint made about the head symptoms so generally referred to quinine.

W. E. HUGHES, M. D.

CUSTAR, Ohio, Nov. 12th, 1877.

Substitutes for Quinine.

I have been examining
Sulph. Cinchonidia. your progressive quarterly NEW PREPARATIONS, and I am very highly pleased with it. I hope it may meet with a warm reception on the part the profession throughout the country. In perusing its pages I find under the heading of "Substitutes for Quinine" some remarks on the medicinal effects of sulph. cinchonidia. I have been using it in my practice for over three years. My experience with the remedy has not been very extensive, and yet it is sufficient to enable me to express my opinion as to its merits. I have used about forty or fifty ounces of sulphate cinchonidia, and it has given the best satisfaction in at least four-fifths of the cases in which I have used it. I usually give it in powders, in one-third larger doses than quinia, and it usually stops the paroxysms of ordinary ague immediately. For ordinary intermittents I consider it fully equal to quinine. As a tonic I consider it superior to sulphate of quinine.

S. A. TILFORD, M. D.

MARTINSVILLE, Ind., January 2d, 1878.

* * * I will say this in regard to
Cinchonidia. antiperiodics, concerning which there is so much diversity of opinion, I have not found cinchonidia as reliable, except in large doses, as many report it. My opinion is that it is not equal to quinine as an antiperiodic, although a valuable remedy.

P. W. PAYNE, M. D.

FRANKLIN, Ind., Dec. 7, 1877.

I noticed in the April and July
Sulph. Cinchonidia. numbers of your valuable journal the articles on substitutes for quinia.

My attention was called to Sulph. Cinchonidia as a substitute for quinia by an article in the *Medical and Surgical Journal* (Phila.), Feb. 1864.

I have been using sulph. of cinchonidia as a substitute for quinia for nine years to the exclusion of all other preparations, and it has given me perfect satisfaction as an anti-periodic and febrifuge, proving in all cases equal to and in some superior to quinia.

As an anti-periodic the action is more permanent and lasting than quinia, and not producing *tinnitus aurium* as when quinia is used.

The dose need not be larger than of quinia to produce positive results.

D. J. COOPERIDER, M. D.

TAYLORSVILLE, Ind.

I am just in receipt of the
Sulph. Cinchonidia. October number of NEW PREPARATIONS and have perused it, as I always do, with considerable interest.

I was much astonished at reading of the poor success that Dr. Wright, of Troy, Ohio, has had in using sulph. cinchonidia in his practice. I have been using it constantly in my practice for the last four years, and find it to be in my hands as good an antiperiodic agent as sulph. quinia. I am using it altogether in the County Infirmary, where I have to treat many old and obstinate cases of malarial fever of all types, *quotidian*, *tertian*, etc., some of which had passed into chronic form of long standing before being admitted into the institution, and in not a single case has it failed to arrest the paroxysms at once. My faith in cinchonidia cannot be shaken.

I have also used your fluid extract of **Guarana.** Guarana for sick headache, and always with the happy result of speedy relief to my patients.

I am very favorably impressed **Dialyzed Iron.** with Dialyzed Iron from the fact that it is a more pleasant form to take, and has no injurious effect on the teeth, stomach or bowels, which is certainly a great recommendation, though it may not be superior in its therapeutical effects to the old "liq. ferri chlo."

W. M. CAMPBELL, M. D.
EATON, Ohio, Nov. 10, 1877.

I notice in your journal **Sulph. Cinchonidia.** that communications are solicited. I have used over *one hundred ounces* of Sulph. Cinchonidia in my practice within this year and last year. I have used it in all cases where quinine was indicated, and I have found it fully *equal* in its effects to quinine. I have not found it producing any of the effects that I see ascribed to it by T. M. Wright, M. D., in the October number of your journal.

My experience with **Eucalyptus Globulus.** eucalyptus Globulus has not been very extensive, but I have a case that I will report. Mrs. A—, aged 35, called me to see her January 1st, 1877. I found her anasarcal, urine scanty and high colored, and upon testing it I found albumen in abundance. She had been under the treatment of another physician for eight weeks without any benefit. I, after making an examination, prescribed eucalyptus globulus fl. ext. $\frac{3}{i}$, ten drops three times a day, to be taken on empty stomach. Her digestion being bad I ordered lactopeptine in five-grain doses. The treatment was continued for eight weeks, the dropsy gradually decreasing, and now, after eight months, shows no signs of returning. She is enjoying a moderate degree of health.

A. P. MURRAY, M. D.
ALBANY, Delaware Co., Ind., Nov. 12th, 1877.

We live in the midst of a malarial **Cinchonidia.** region where it becomes necessary daily and even hourly to prescribe anti-periodics of all kinds. We have for the last two years used much of the new alkaloid cinchonidia, and regard it as differing little from quinia in its effects and power to control all forms of malarial disease. For the purpose of breaking an ague it

requires to be given in larger doses than the quinia with this exception there is no other difference.

DRS. MILNER & AMBROSE.
ROCKPORT, Ind., Nov. 17th, 1877.

In ordinary intermittents, **Cinchonidia Sulph.** for adults, I prescribe,

Cinchonidia Sulph. \mathfrak{Dj}
Acid Sulph. *Arom.* *q. s.*

ft. massa. Equally divided, the mass nicely fills four of Parke, Davis & Co.'s empty capsules. To be taken singly during intermission; the first soon as fever cools, the last, at least, three hours, before chill time, the other two in the interim, dividing the time as nearly equally as convenient.

In the above manner I have used one hundred and fifty ounces of Cinchonidia with entire satisfaction, failures being rare, and my patients seldom complaining of nausea or cinchonism.

Have had good success with **Kava-Kava.** Kava-Kava in gonorrhœa and chronic cystitis. A case of the latter disease, of four year's standing yielded to two $\frac{3}{4}$ of the fluid extract.

J. G. MUNSELLE, M. D.
IRVINGTON, Ill., Nov. 20, 1877.

In looking over the October number of your journal **Sulph. Cinchonidia.** I noticed an article from T. M. Wright, M. D., Troy, Ohio, upon the value of sulph. cinchonidia as an antiperiodic. Dr. Wright's experience is exactly my experience. I did not condemn the drug because I thought the error might be in the way I used it. Yet I stopped using the sulph. cinchonidia except as a tonic. As an antiperiodic I have far better results from the use of sulph. cinchonidia and chinoidine. I would like to hear more from the use of sulph. quinia, from any one who are posted. Also the action of sulph. acid as an antiseptic; especially in typhoid fever.

I have been using the **Grindelia Robusta.** Grindelia Robusta in asthma with the best of results, of which I will report at some future day, if it would benefit any M. D.

DR. JOHN LAMOREUX.
LOCKE, Nov. 4th, 1877.

(Certainly let us hear from you, and from every doctor that has any experience with any new remedy. This is just what NEW PREPARATIONS is established for.—ED.)



NEW PREPARATIONS.

GEO. S. DAVIS

AND

C. HENRI LEONARD, A. M., M. D.,
EDITORS.

DETROIT, MICH., JANUARY 15TH, 1878.

GEO. S. DAVIS, Publisher.

Editorial.

New Remedies.

WE wish to have our grounds that we intend to cultivate the coming year, perfectly mapped out, that our readers may not be stumbling into pitfalls, misjudging us. By some it has been supposed, from our title, that we intend to endorse questionable "new preparations," those whose favorite nominal terminations are in *ine* and *um*; those of the diphtherine, digestine, and chloralum order, whose ingredients and proportions are known only to their compounders. Far from endorsing these preparations, or aiding in the dissemination of their much advertised virtues is the province of NEW PREPARATIONS.

Our aim is only to bring such remedies before you whose botanical or chemical history, manipulation, etc., is open and above suspicion. Of course, from the nature of things, it is impossible that they shall have the sanction of even the majority of the profession, as the main feature of the journal is only to bring to your consideration those drugs, or pharmaceutical products whose history, at present, is but little known.

We also ask of you, one and all, a proper and conscientious trial of these new comers on such cases as you may deem appropriate, and then report to us your success or failure with the remedies. We want to recommend no product with manufactured testimonials; but wish a *bona fide* test of the virtues of each of the new drugs. All of this is of much moment to yourselves, as physicians,—aye, much more than it is to us.

We wish you also to make this journal, *your* journal, essentially, for communicating your new discoveries with your professional confreres. Instead of writing to them severally, however, as a matter of courtesy, give the information to the thousands of others of our readers by communicating with us. A copy of NEW PREPARATIONS reaches twenty thousand physicians and druggists of our great country each issue, hence, you see, an item of importance in your practice may be the means of doing an incalculable amount of good to many cases of suffering humanity.

As a matter of guarantee to yourselves, we promise, on our part, to introduce no drug to your notice

unless we have good reason for believing that it is, at the least, worthy of trial, if not worthy of confidence. The only way then to build up the history, the reputation of the new comer is to write us your experience with it. If it fails in your hands, for sometimes a remedy will fail, we shall be as willing to give a hearing against the remedy as to give one recommending its powers of healing. You know, as well as do we, that it is our later therapeutics that is reaping the reward of success in the professional arena. New discoveries are continually enabling us to to successfully combat the new phases of disease, as well as to overcome those that baffled the skill of our professional forefathers. This is pre-eminently the case with many of our now favorite remedies that a half-century ago were unheard of. The possibilities of the future are great, and there is no reason why therapeutics should not keep step with the advance in botanical, physiological and pharmaceutical progress.

Questionable Remedies.

HAS it ever occurred to you how many drugs, properly under this classification, are now on the market? We do not mean to include under this head the thousand-and-one patent-right remedies that load down our apothecaries' shelves here, there and everywhere; but those that are pushed forward, in many cases, by prominent houses. In the previous article we have alluded to this innovation briefly; but our attention has been more particularly called to the matter by reading in a recent number of the *St. Louis Clinical Record* a pretty strong editorial upon the abuse of confidence of medical journals in the matter of Dr. Polk and his Glycerite of Kepheline. We hardly think, however, the medical press should be the victim of such a severe pronunciamento for the fact of its admitting an article—which on its face is proper enough—to their pages, when the *Record* allows itself and other similar first-class journals to go Scot-free on the matter of other *** "*i-n-e*" preparations that find their way to their several advertising columns. In this same number of the *Record*, for instance, is an endorsement of "Ingluvine," lately called "Digestine," by a lengthy quotation of its virtues from a paper written, apparently, to advertise the preparation. Then there is also an "acknowledgment, with thanks," in editorial type, of samples of the still more questionable "Diphtherine" and "Bronchial Alterative, Firwein." Why strain at a gnat, brother, when you so easily swallow a camel?

To be sure the endorsement of a well-known firm given in the shape of a label, bearing their signature as manufacturers, is a better guarantee, perhaps, than the testimony of an interested doctor, as is evidently the case with Dr. Polk's *** "*i-n-e*." Still, really, is there very much difference between the preparations themselves when you come to consider their real virtues? They are all of some

fanciful name from some—in most cases—fanciful product, whose composition is only known to the manufacturers. Indeed, it has become rather fashionable for a drug or chemical firm to have an *** “*i-n-e*,” “*i-a*” or “*comp.*” flag flung to the breeze. In a legitimate way they all may have established a large reputation, still the time only too soon comes when many of them make this doubtful show of enterprise, and thus, perhaps inadvertently on their part, get the confidence of the profession, from the fact that they heretofore have kept themselves aloof from suspicious and doubtful pharmaceutical products and combinations.

We have taken some pains to collect the names of these wondrous *** *i-n-e-s*, etc., that are now seen prominently in our exchanges. We have arranged them alphabetically so as not to incur the suspicion that we prefer the otherwise first-named as being more efficacious :

Bromidia,
Bromo-Chloralum,
Chloriastos,
Cincho-Quinine,
Cosmoline,
Diptherine,
Firwein,
“*Fresh*” *Meat Cure*,
Glycerite of Kepheline,
Glycerole Yerbine “Comp.”,
Ingluvin,
Iodia,
Iodo Bromide Calcium “Comp.”,
“*Kidney*” *Leaf “Comp.”*,
Lacto-Peptide,
Liquirizina,
Maltine,
Peptonized “Beef” Tonic,
Peptodyn,
Protagon,
“*Sweet*” *Quinine*,
Veradia,
“*Vitalized*” *Phosphates*,
etc., etc.

Well, that is quite a motley-looking crowd, isn't it? Some of them may wear a little finer broadcloth, speaking figuratively, but that is about all the difference there may be between them. A silly fellow does not look so very uninviting if in full dress at an evening party; but who would wish to attend an entertainment where none but silly, well-dressed fellows were invited? It is much after the same manner of things with all of these *** “*i-n-e-s*.” See them sandwiched in with good pharmaceutical products, and their somewhat showy make up is overlooked; but to see them altogether, with none of pharmacopœal birthright to relieve their flashy monotone, they have not, surely, much to commend them to our better judgment.

Our New Dress.

HOW do you like it? Possibly we feel over-much anxious for every body to know it. Still we do think it is quite an improvement over the much battered and worn-out dress of our old numbers. We have also adopted a new style in the “make up” of the journal, believing it to be a great improvement over last year's. A book review department has been introduced, and we hope our publishers will see fit to keep us posted with their new issues as they may appear, believing it to be an advantage to them as well as to you. With a Happy New Year to you all, we enter upon our editorial work for 1878.

The Telephone.

THIS is hardly classable as a new remedy, or as an old one put to a new use; still it may have an important part to play in the future practice of the profession. For some four months now we have employed one in visiting, so to speak, one of our families with satisfactory results, and a saving of a couple of miles of travel each time. Conversation can be as easily carried on as in the presence of your patient. The only thing needful is personal contact with the patient; but possibly we may yet have a telephonic syphmograph, and telephonic mirror and auscultator. With these, what would physicians ask more?

A New Medical Journal.

WE welcome to our table *The Michigan Medical News*, a semi-monthly medical journal, devoted to the interests of the profession of the Northwest. The price is so low, one dollar per annum, that no one can have a reasonable excuse for refusing it his support, if practicing in the professional territory of whose interests it will be the custodian.

Its editors are *all* well known men in Michigan, at least, and many have a national reputation. This, of course, is sufficient guarantee that the policy of the new paper will be liberal, scientific and unpartisan.

A prospectus will be found in our advertising pages, which we ask each physician, in the Northwest especially, to read carefully; and then—we presume the managing editor would be glad to receive your dollar.

The strange feature of the case is that the *News*, is with its *first* issue on a *paying basis*,—usually medical journals are supported from inroads upon the pockets of its editors or “backers.” We hail this as a foreshadowing of the millenium in medical journalism. It certainly speaks volumes upon what the profession now demands, viz: a low-priced, frequent and “newsy” office companion.

Book Reviews.

THE VEST-POCKET ANATOMIST.—The third English edition. This book is sufficiently described in our advertisement on the second page of cover. This is the third order for 500 copies that we have filled for Messrs. Balliere & Co., of London, England, since last July. They write that it is having a very rapid sale and is very satisfactory.

THE DOSE AND DAY BOOK AND PHYSICIAN'S LEDGER, both just issued, is quite fully described on the third page of cover. By using these books nine-tenths of the burden of book-keeping is saved the physician. The "Day-Book" weighs but about five ounces, and is handy in size for any pocket. It is bound in full leather, with a pencil loop, and has a black side-stamp. The "Ledger" is quarto size, of over 200 pages, and is beautifully bound in leather and cloth, with gold side-stamp. Each yearly portion is alphabetically indexed, so no paging or referring to a ledger index is ever necessary.

CORPULENCE TREATED WITHOUT STARVATION, OR HOW TO GET LEAN. By *M. M. Griffith, M. D.* 12mo. paper, p. 79. Price, 50c. Post-paid on receipt of price by Kenyon & Co., Detroit.

This little brochure on corpulency cannot but be of interest to any person that is weightier in flesh than he thinks comfort demands. The author has made no special effort to be original in his book, but being a victim to "too much adipose tissue" himself, he has compiled from all obtainable sources everything he could; and then to this has added his experience, personal and potential—if you will allow us to coin a new word for the occasion—with the several treatments, and then finely adduces his own plan, with cases to prove its value.

ON COUGHS, CONSUMPTION, AND DIET IN DISEASE. By *Horace Dobell, M. D., F. R. M. C. S.,* etc. Consulting Physician to the Royal Hospital for Diseases of the Chest, London, etc. Philadelphia, D. G. Brinton, 115 S. Seventh St. 12^o, p. 222, cloth \$2.25, post-paid.

This handy little manual, edited by Dr. Brinton, of the well known Philadelphia *Med. and Surgical Reporter*, is well worth its price to any physician having anything to do with the common diseases in our temperate climates. Though not originally written for book publication, yet Dr. Brinton has admirably grouped the lectures together, so as to form a harmonious whole. We think the introductory chapter on "Diagnosis of Pulmonary Disease" the most clearly written treatise upon that bug-bear for young practitioners—auscultation and percussion—that we have ever read. This alone would commend the book.

A GUIDE TO THERAPEUTICS AND MATERIA MEDICA. By *Robert Farquharson, M. D.,* Edin., F. R. C. P., Lond., Lecturer on Materia Medica at St. Mary's Hospital Medical School, etc. Enlarged and adopted to the U. S. Pharmacopœia by Frank Woodbury, M. D. Philadelphia, Henry C. Lea. 12mo. cloth, pp. xix and 410, \$2.00.

This is one of the best condensed works on materia medica and therapeutics that we have yet seen. The following, taken from the American editor's note, is a true description of the arrangement and matter. "Every remedy included in the primary list of the materia medica of the United States Pharmacopœia is presented in regular order. When botanical and chemical definitions are given in the Pharmacopœia, they are also reproduced, the customary doses affixed to remedies adapted to internal use, and, wherever practicable, the composition and strength of

the officinal preparations are also indicated." Besides this many of the remedies in the "secondary list" are also given in as full detail. To all that admit of it, the physiological and therapeutical actions of the remedy are contrasted by arranging these in contrasting columns. Where poisons, the antidotes are given. The preliminary chapters on antipyretics, diaphoretics, etc., etc., are also excellent. Indeed, as a handy reference book it is yet unequalled.

MODERN SURGICAL THERAPEUTICS: A Compendium of Current Formulæ, Approved Dressings, and Specific Methods for the Treatment of Surgical Diseases and Injuries. By *Geo. H. Napheys, A. M., M. D.,* etc. Revised to the most recent date. Philadelphia, D. G. Brinton, 115 S. 7th St., 1878. 8^o, p. 587; cloth, \$4.00; full leather, \$5.00., post-paid.

This is a companion volume to Napheys's Medical Therapeutics, so well known. Heretofore, if we remember rightly, both volumes were printed in one. There was such a demand for it, and material accumulated so rapidly that the editor, Dr. Brinton, in order to do justice to the treatises, was compelled to separate the two, and so has given us, instead of the single volume, two separate octavo volumes of some six hundred pages each. No prescription is duplicated in either volume, neither is the same subject twice treated of. This book is divided into sixteen chapters, treating of subjects, as follows:—Therapeutics of inflammation; Anæsthetics; Dressing of wounds; Complications of wounds; Special forms of wounds; Lesions from heat and cold; Lesions of the connective and muscular tissues,—of the bones and joints,—of the organs of circulation,—of the organs of digestion,—of the organs of urination,—of the organs of reproduction,—of the organs of special sense; New growths; Treatment of scrofula; Diseases of the skin; Venereal diseases.

The indexes are conveniently arranged, being first of the authors (some six hundred in number), then of the remedies, and then of the diseases. As it is practically in its *fifth* edition, this alone is sufficient guaranty of its worth without further commendation from us.

THE PROCEEDINGS OF THE MEDICAL SOC'Y OF THE COUNTY OF KINGS, N. Y., we welcome among our list of exchanges. The coming year the Kings County Pharmaceutical Society unite with the Medical Society, and so publish their proceedings conjointly. This is a good idea. The typography of the *Proceedings* has always been unexceptional and its articles wholesome.

INFANTILE THERAPEUTICS, by *John A. Larrabee, M. D.,* Prof. Mat. Med., etc. in Hosp. Col. Med., Louisville. This paper was read before the Kentucky State Medical Society. It is an interesting contribution to our literature upon children's diseases. The professor speaks highly of the extract of malt in dyspeptic and diarrhœal troubles. In post-scarlatinal dropsical cases he speaks highly of jaborandi.

TRANSACTIONS OF THE WISCONSIN STATE MEDICAL SOCIETY.—The mechanical execution of this book is certainly fine. The papers thus preserved are also interesting. The volume opens with the address by the President, J. K. Bartlett, M.D.; then follow papers by Drs. Kempsten, Day, Wenzel, Barnett, Senn, Linde, Fox, McCall, Stoddard, Graettinger, E. W. Bartlett, Jenkins, Whyte, Bennett, Davis, and VanDusen. The article upon "Embolism," by G. W. Jenkins, M.D., has four photographs accompanying the text.

FIRST ANNUAL REPORT OF THE PENNSYLVANIA FREE DISPENSARY FOR SKIN DISEASES

is at hand. This Dispensary is at 920 Walnut St., Philadelphia, the Secretary and Treasurer being G. W. McKeehan, Esq., the physician in charge, J. V. Shoemaker, M. D., assistant physician, J. H. Sargent, M. D., consulting and visiting physicians, many of the best doctors of the city. The year closes showing 413 cases to have been treated, with a result of 289 cures; still under treatment, 19; no report, 105.

Clippings.

EUCALYPTUS IN DIPHTHERIA.—The accustomed reader of medical journals of the present day cannot well avoid noticing the unusual amount of matter now being written upon the subject of diphtheria. The conclusion would naturally arise, in such case, that this had become either a very common disease, or one about which there exists great difference of opinion. Whether the former or latter be the true solution, it must be the conceded duty of each one having such cases under his care to give his experience in the treatment, through the medical journals. So, in accordance with such convictions, I will offer my mode of treatment. During the past twelve months scarcely a family in this whole section of country has escaped this fearful disease. I have had as many as half a dozen cases in one house at the same time, and have used almost every form of treatment. During the prevalence of this epidemic, I have had under my charge about two hundred cases. I will give the particulars of only one case, which will fully illustrate the advantages of my mode of treatment.

March 16th, 1877, I was called to see a case, age about eight years. I diagnosed at once a genuine case of diphtheria, and put him on the following, viz: chlorate of potash, sulphite soda and glycerine internally; also sulphas quiniae as a tonic and stimulant, and as a local application equal parts of tincture iodine and glycerine. This plan I have found to succeed in a large majority of cases, but in the present case, in spite of my perseverance with the above course, in combination with other minor points, I was nonplused to see my patient gradually growing worse. The membrane in the fauces, pharynx and nares at this time was quite extensive; so at this juncture I concluded to make a change in the local treatment, which consisted in the substitution of fluid extract eucalyptus globulus instead of iodine and glycerine. Imagine my wonderful surprise, on the first application of the eucalyptus globulus, to see large flakes of membrane readily peel off, and the same result on each subsequent application; and in a few days I had the pleasure of seeing my little patient convalescent. Since using the eucalyptus globulus in the above case, I have tested its powers in quite a number of other cases, and can heartily recommend its use to others. In some cases I use it as a mop, with a soft piece of sponge, in others simply as a gargle.—J. E. MASSEY, M. D., in the *Medical and Surgical Reporter*.

EUCALYPTUS AS A LOCAL ANÆSTHETIC.—Dr. Horton (Ohio State Dental Society) speaks of the extract of eucalyptus as producing good results as a pain obtunder in sensitive dentine. A drop on a pledget of cotton is used. He thinks it the best of the local applications.—*Louisville Medical News*.

YERBA SANTA (ERIODYCTION GLUTINOSUM.)—This agent was first introduced to the profession by Dr. Bundy, of Colusa, Cal., and I can well recall the thoughts which ran through my mind when I

first read his report in one of our medical journals of several cases treated with the remedy. I thought it another sensation from some over enthusiastic person. But as I had several patients who were, and had been for some time, troubled with bronchitis of an atonic nature, and I had no direct remedy at my command, it was an easy matter for me to reason that all of our best remedies were once new; and thus I concluded to send to Dr. B. for some of the "Yerba Santa," which I received in due time; made some into a saturated tincture of all alcohol, and some into a tincture of alcohol 70, and after using both I found the latter tincture the better of the two, both being given at different times to the same patient. I give the leading symptoms of one case, in order to point out the specification of the drug.

Mrs. M., a lady about forty-five years old, came to me for consultation. She had been treated by physicians of all schools, in this city as well as Chicago. She did not expect to be helped by any one, for the cough which was troubling her did not abate under all the array of medical skill; and she was tired taking medicine, and was satisfied she had confirmed consumption, for some of her physicians had told her so. Upon examination I found that this cough she had had for five years, and got worse whether she took medicine or not. She was greatly emaciated, limbs inclined to be dropsical, digestive apparatus out of order, as it always is in cases of this kind, pulse weak and 96, quite nervous, bronchial tubes dilated, blowing sounds very distinct all over the chest, also a moist, rattling sound showing an accumulation of mucus in the smaller bronchial tubes, respiration about 26, tongue broad, relaxed and pale. All the symptoms were such as to discourage me, and I hesitated to tell her what she wanted to know, viz: if I thought I could help her. I told her that if she would take medicine for two weeks, I would tell her if I could help her. This she consented to do. Prescribed—R. Tinct. Yerba Santa oz. j, glycerine oz. iij. M. Sig., a tea-spoonful four times a day. In one week she returned. Upon examination found her some better; renewed the prescription, and in another week she herself said she would run the risk of my curing her. Cough less, expectorates easy, blowing sounds much better, pulse 85, respiration 22, digestion greatly improved; and right here let me say, that the remedy is an excellent anti-dyspeptic in atonic conditions of this kind. To make a long story short, this lady took the above prescription for two months, and was well; now ten months since, and she is as well as she has ever been.

Miss N., a teacher, came with cough and hemoptysis. Found bronchial tubes dilated, and in an atonic condition. Prescribed—R. Tinc. Yerba Santa oz. ss, glycerine oz. iiiss. M. S., a tea-spoonful three or four times a day—when all the symptoms disappeared.

Mr. H., atonic bronchitis helped in a very short time. Mr. M., atonic bronchitis, cough for years, weak and much emaciated, digestion very bad. R. Tinc. Yerba Santa oz. j, glycerine oz. iij. M. In about five weeks discharged cured.

Mrs. P., bronchitis with abscess of left lung—usual symptoms. R. Tinc. Yerba Santa oz. j, glycerine oz. iij. M. S., a table-spoonful every three hours. After she had taken this for two days she raised about a pint of yellow-greenish matter; felt quite easy about the chest. Gave the above three times. Lung troubles all removed. Gave glycerine and muriated tincture of iron, for about three or four weeks. This is nearly a year since, and the lady, although old, feels well; no more cough, and what surprises me is that she has no more trouble with the abscess.

The point I wish to make is, that this agent is a remedy in *atonic* conditions only; in inflammation it is worse than useless.—Dr. GABEL, in the *Southern Medical Record*.

Dr. Yost spoke of the use of *Yerba Santa* in certain cases, especially in spasmodic asthmatic bronchitis. The remedy was a good one for various pulmonary affections.

Dr. Pitzer said *Yerba Santa* had been introduced by J. H. Bundy, M. D., of Colusa, California, and was, in his opinion, an exceedingly valuable remedy in cases of diseases of the larynx or bronchial apparatus.

Dr. Munk has also used the last-named remedy with excellent effect. It was the production of a great deal of temporary relief and strength, even when the lungs were in a hopeless condition.

Dr. Younkin thought that it was the duty of eclectic physicians to search out the best remedies, not only among those which were old, but also those which are new. They should take a foreground in the matter of the pathology of disease, and re-investigate the whole question closer than heretofore, which re-investigation would have the effect of regulating the application of new remedies.

Dr. A. Merrell was averse to administering *Yerba Santa* in the common way, because, as he said, it was a dirty, nasty remedy, which hurt not only the patient's but the administering physician's feelings. His method of compounding this remedy was to take one ounce of the fluid extract of *Yerba Santa*, or two ounces of the specific tincture, add three fourths of an ounce of sugar of milk, and allow them to evaporate, after which powder, and add sufficient sugar of milk to make the weight equal to the first weight of the fluid extract. In such a compound the distasteful flavor is removed, the proportion being one grain of sugar of milk to one minim of the extract, and the latter is made more certain of absorption.—(Proceedings of the Mo. State Eclectic Medical Association.)—*Amer. Med. Journal*.

GRINDELIA SQUARROSA.—*Grindelia squarrosa* is one of several new remedies that Dr. J. H. Bundy, of California, has recently introduced to the notice of the medical profession, all of which are possessed of real merit and deserve the patronage of physicians. He has fortunately seized the "golden opportunity" by making these important discoveries in the properties of some of the plants that are native to California soil. For ages they have slumbered in obscurity, but at the hands of Dr. Bundy the Golden State has been made to yield up wealth other than that contained in her mineral deposits, which is none the less real for being stored up in plants. The doctor has the thanks of the medical profession for his enterprise in drug proving, and particularly for his generosity in giving to the world his valuable discoveries.

Not every candidate for professional favor in the form of a nerve remedy is found to be reliable when subjected to a practical test, as many of this class of agents are introduced only on a theory, which upon trial prove indifferent or worthless. With such an experience the average reader of the current medical literature concludes that it would be only simple justice, in view of the fearful consequences of tampering with human life, to require all the contributors to medical periodicals to make affidavit to the truth of their statements before permitting them to appear in print. If a writer does not positively know what he is about to communicate, he should so qualify his statement as to conform it to the facts, whatever they may be, and not prevent the truth merely

to support some pre conceived theory or a pet hobby.

I have tested to a limited extent the remedies introduced by Dr. Bundy, excepting his last, *berberis aquifolium*, which I shall try at the first opportunity, and find them to be as represented. Lest, by writing as some do, one might think that I was in coalition with the doctor, and took this means to give him a "puff," I will say that I have no acquaintance with him whatever, either personal or by correspondence, but I believe in "giving honor to whom honor is due."

CASE I.—A little miss of six summers. Has had the chills for more than one year, the paroxysms occurring every third day, excepting occasionally an intermission of one or two weeks in which she was without any chills while taking some anti-periodic medicine. In the interval between the exacerbations the patient seemed to be moderately well, save that she was more peevish and fretful than natural. The abdomen was somewhat enlarged, with a pain and a slight hardness in the left side, which was due to splenic trouble. The patient had received treatment from different physicians without any permanent benefit. Has also changed climate by being taken to Kentucky, where she remained several weeks, but without being improved in health.

When the case came into my hands I gave her cinchonidia in large doses, which broke the chills for a time, but they soon returned with increased severity. About that time I read Dr. Bundy's article on *grindelia squarrosa* in *NEW PREPARATIONS*, when I resolved to try his treatment. I procured some of the drug and prescribed:

R. Fluid extract grindelia squarrosa, ʒ ss; glycerine, ʒ iijss. M. S. A tea-spoonful every four hours. The patient did not have another chill after taking the medicine, and has taken only one bottle of the mixture. The pain in the side has subsided, appetite and digestion good and the bowels regular.

CASE II.—Mr. S., aged 35 years, and is of a bilious temperament. Appearance indicates a typical case of malarious disease. Has had the chills for about a year, the paroxysms regularly every other day. He is very feeble and emaciated and can do but little work when he feels his best; complexion very sallow; headache; appetite poor, and can eat but little, as it causes distress in the stomach; spleen very much enlarged and tender on pressure; more or less pain in the left side all the time. Had been the round of doctors and patent medicines, "being nothing benefited but rather made worse." Being acquainted with him, I accosted him on the street one day by inquiring after his health, having seen him looking badly for a long time. In answer to my inquiry, he replied: I am poorly enough, and getting no better fast." "What are you doing for yourself?" "I have tried several doctors, but they have done me no good, and now I am taking anything that I hear that will help me.

Remembering what good success I had with the *grindelia* in the previous case, I said, "I can cure you, or if I don't, I will not charge you anything."

To this he consented, whereupon I prescribed

R. Fl. ext. grindelia, ʒ j; glycerine, ʒ iij. M. S.—A table-spoonful every four hours. The medicine acted on him like a charm, better even than I anticipated. He had a chill the next day after commencing to take the medicine, which was the last. After the second day he improved rapidly in every respect, and at the end of a week he felt like a new man. Under the action of the medicine the bowels began to act more freely, passing a dark, bilious-looking discharge, which lasted several days, and which he said made him feel better. The pain left his side

and the spleen rapidly decreased in size, the skin lost its sallow color, his appetite improved and he could eat with a relish. He has taken only one bottle of the medicine, and at the end of a month says he feels perfectly well.

In the *grindelia squarrosa* we undoubtedly have a specific for *chronic malarious disease*. I have never seen anything act as nicely as this drug in these cases. I have also tried it in several acute cases of fever, but not with the same success as in chronic ague. It invariably caused nausea, so that it had to be discontinued.—J. A. MUNK, M. D., in the *American Medical Journal*.

GRINDELIA SQUAROSA.—Having introduced this drug about a year ago to the medical profession, and using it constantly in practice ever since, and obtaining such excellent results from its use in malarial diseases, I can not refrain from still presenting it, or bringing it before the profession again, and shall do so until all shall know of it, and its great value. It belongs to the natural order *compositæ*, and is termed, in common parlance, "gum plant, or gum weed," and *not* tar weed. It is perennial, and grows in our valleys. As a remedy in splenic hypertrophy nothing can excel it; and where quinine fails to break chills, this does the work well. Its action upon the liver is satisfactory when there is pain in the organ, no matter what the trouble is, and it exerts the same influence where there is pain in the splenic region.

In testing the drug it produces terrible pain in the eye-balls and dilatation of the pupil; and I find that in colds affecting the eyes with soreness when they are moved, and muscular tissue also, where ever there is soreness, it relieves in a short time. I have been using it in diseases of children where the brain was involved, especially in determination, and I like it much. Its action upon the nervous system is very marked, and much more prompt than any preparation of *hyoscyamus* I ever used. The indications for its use are these: a pale, puffy appearance of the tissues, enlarged spleen, pain in the right or left side (hypochondriac region,) chills and fever, soreness of tissues, pain in the eyes or head, and determination of blood to the head.

I have received many letters from physicians in the South, who testify to its great curative powers, and who still keep sending to me for the drug. To those let me say, that it is impossible for me to furnish the drug, as my business (practice) occupies my entire attention. But I have made Parke, Davis & Co's laboratory a depot for the *grindelia* and *yerba santa*, and they can be obtained of them in crude or liquid form, as any may wish. The drugs sent them are perfectly fresh, and sent by myself, and I can assure all who want them that they are the same as though I sent them, and I hope this will fall before the eyes of scores who are still sending to me for it.

To illustrate its effects by citing cases is useless, for I use it every day, and all the time, and want nothing better in the conditions above referred to, and a fair trial will satisfy any and all; it speaks for itself.

I shall have occasion to write upon this subject again, and any who wish to know more concerning it at present can be informed by writing to me. I think it will take the place of quinine, more or less, in the future. Its application topically is splendid in all skin diseases, sores, bruises, etc. The dose of the fluid extract is from one-fourth to one drachm. In chills I have given two drachms at a dose; but its influence on the head is unpleasant. In enlarged spleen 3 ss is sufficient three times daily, and I always give it with tr. ferri chlor. in full or suitable

doses, and give it in the same way after the paroxysms of ague have been broken, with quinine, and it will prevent their recurrence. It should be given in syrup or glycerine, as it contains so much gum that, when added to water, it throws down the gum as a deposit. But when put with water as a local application, I only use $\frac{3}{4}$ ss tincture to $\frac{3}{4}$ viij of water, and in this quantity it does not separate badly. Hereafter I will write further on this valuable drug.—J. H. BUNDY, M. D., in the *American Medical Journal*.

FLUID EXTRACT OF DAMIANA (TURNERA APHRODISIACA.)—After a continued experience of several years with preparations of this plant, commonly known as damiana, and lately determined by Prof. L. Ward as *turnera aphrodisiaca*, I find that my first papers and experiments have been well sustained in establishing its merits as a powerful, permanent, and determined aphrodisiac as well as an alterative aperient of remarkably fine quality, indeed, of such a nature that, should it possess no other medical value, this alone would place it high in the therapeutical world, when well known and appreciated. My attention has been called time and again by my patients to this fact, that after a few days' exhibition of this fluid extract, which preparation I prefer to prescribe to all others, in doses of a dessert-spoonful three times a day, that their bowels have been moved with mushy stools often twice a day. My esteemed friend, Alex. Murray, M. D., F. R. C. S., of New York City, was the first to call attention to this feature of Damiana through *The Medical Record*.

Damiana, beyond doubt, is the most reliable, useful, and permanent tonic to the genital organs of both sexes that we have thus far discovered. Of course it must be carefully selected and manufactured of the genuine plant, *turnera aphrodisiaca* (Western Mexico abounds with it.) Then, again, it should be given in full doses for a fair duration of time, say a dessert to a tablespoonfull three or four times a day, for several weeks, to obtain the best results. Furthermore, those suffering from permanent organic injuries should be warned that damiana, or any other remedy, is futile in their case. This has been, I am sure, another fruitful source of disappointment in the uses of damiana. I earnestly urge the profession, first, to obtain the genuine article, then to give this new and most valuable medicine a fair trial. I feel safe in saying that eventually it will be classed among the standard remedies of our land.

The following is the additional history I have been able to obtain (so far) of the plant damiana.

The Damiana herb has been a domestic medicine of Mexico, where it is generally used to invigorate the system. As far back as the year 1699, in the reports of the Spanish missionary, Padre Juan Marie de Salvatierra, we find it was known to the Indians as a cure for inability to exercise the reproductive functions in both sexes. The medicinal qualities of this shrub were first noticed by the Indian hunters, who, after wearisome journeys through parched countries, made a decoction of the damiana, and drank it with avidity to invigorate their exhausted system, brace their nerves, fitting them for further fatigues. The qualities did not long remain a secret; the herb became familiar to all the inhabitants of Mexico, and has maintained its celebrity up to the present time. Acting, as it does, directly upon the nervous system, it restores, as it were, the debilitated functions of the principal organs of the human frame, and is unsurpassed as a nervine. In all cases where accidents have produced premature births, also during painful menstruation, and as a cure for the many afflictions suffered by women after gestation,

this remedy will be found to build up the constitution quicker than any nervine or tonic with which we are acquainted. Persons who, from the effects of malpractice, are suffering from general debility, will find this extract of damiana a cure for all these chronic affections, giving strength and vitality to the frame, imparting muscular energy when general prostration threatened to undermine the constitution. —JOHN J. CALDWELL, M. D., in *The Medical Record*.

JABORANDI IN DIABETES MELLITUS. — "Mr. W. C. P., aged twenty-nine, single, came under treatment November 11, 1876. The case presented the following symptoms: Considerable emaciation; skin hard and dry; bowels constipated, and the feces solid and free from moisture; tongue dry, parched and sticky; thirst inordinate and insatiable; appetite keen; urine transparent, of a pale straw or greenish tint, and emitting an odor like sweet apples or new-mown hay; specific gravity, 1040; quantity voided, seventeen to twenty pints in the twenty-four hours, and leaving white spots of diabetic sugar whenever sprinkled upon the pants, and attracting large numbers of flies when allowed to stand any length of time in the chamber. The patient also complained of a feeling of emptiness of the stomach, great debility, chilliness of the extremities, an aching sense of weariness in the loins and legs, and considerable *ennui*; an uneasiness in the stomach after meals; flatulence and acid eructations; dimness of vision; redness of the gums and mouth, and peevishness of temper. On evaporation I obtained a deposit of crystalline diabetic sugar.

"From the time of seeing Mr. P., November 11th to February 11th, I had him upon opiates, tonics, bicarbonate of soda (as recommended by Dr. Clark in the American Journal of the Medical Sciences, vol. xxxvii., page 575), creosote and the resinous cathartics, as aloes, rhubarb, etc. I confined him to a meat diet exclusively, and guarded him against the vicissitudes of our very severe winter.

"February 11th: After the above treatment had been persevered in for three months without any material change in the symptoms, I determined to put the patient on fluid extract of jaborandi in connection with iron and quinine, allowing him nothing to drink but tar-water. The first dose (one ounce) of the jaborandi produced considerable diaphoresis and salivation, so much so that the flow of saliva was continuous from one dose to the other, given three times a day, although the diaphoresis commenced about an hour after taking the medicine, and continued only about an hour. Each dose produced the same effect.

February 18th; The patient has been improving; urine diminished one half; specific gravity 1030; very little thirst; general weariness and *ennui* diminished.

"March 20th: Treatment continued without any variation, and the patient's condition very greatly improved. Not necessary to void the urine but once during the night; specific gravity normal; flesh increased; skin soft and moist; thirst entirely relieved; appetite good and natural; salivary glands active.

"August 27th, 1877: I consider Mr. P. as well as he ever was, though I continue the fluid extract of jaborandi and restrict him to animal food.

"Was the above a case of diabetes mellitus or insipidus? If the former, is he cured, or is the disease only held in abeyance by the treatment continued in a modified degree to the present time? The high specific gravity of the urine, the sacchar-

ine matter it contained, and all the symptoms enumerated go to make up the diagnosis of diabetes mellitus." —Dr. John H. Poole, in *Virginia Medical Monthly*.

THE MEDICAL VALUE OF JABORANDI.—The *British Medical Journal*, July 7th, states that in the Highgate Sick Asylum, under the care of Dr. Dowse, special observations were made on the action of the newly-introduced remedies, jaborandi, gelseminum, salicylic acid, etc.; and modern instruments, as the cardiograph and ophthalmoscope, were brought into daily requisition to elucidate complete diagnosis. Dr. Dowse said that his experience of the use of jaborandi did not lead him to think highly of its therapeutic value when given alone, yet it was often of great use, when combined with other drugs, to promote elimination. In the following case of Bright's disease its efficacy was well shown. J. A., aged seventy-three; urine pale, gravity 1.010; albumen copious; hyaline casts. He had irritable heart trouble, some dyspnoea, and painful and swollen joints. Five grains of the extract were given three times a day with alkali and digitalis, producing profuse ptialism and sweating. Under this treatment the joint soon became free from pain, the swelling of the limbs and the dyspnoea subsided, and he was rapidly improving in every way.

Dr. Dowse said that he at one time thought that jaborandi would be found of value to reduce the night temperature of phthisis, but after a long experience he found such was not the case. He referred to its efficacy in promoting the flow of milk where the mammary gland was inactive after parturition, and remarked that its physiological action was of the greatest interest and importance, especially when compared with the action of belladonna, to which it was in every way antagonistic. One curious feature relative to its action, which had not been noted by M. Vulpian, was the re-secretion of pilocarpine from the blood by the submaxillary gland. A patient who was taking it stated that if he re-swallowed the saliva produced by jaborandi, it then produced profuse sweating; whereas, on the other hand, if the saliva was ejected, only slight perspiration resulted.—*Druggists' Circular*.

JABORANDI IN MASTITIS.—Dr. G. M. Wells, of Sonoma, Cal., writes: "SIR:—Allow me to direct the attention of the profession to the use of jaborandi in mammary abscess.

"Mrs. G. has been the subject of repeated abscesses; as soon as one was formed and lanced another succeeded, until she became 'weary and worn out.' Quinine failed, sulphocarbolates did no good, belladonna externally disappointed our hopes, so I determined to try some other remedy and gave the following:

R Ext. jaborandi fld.,
Ext. dandelion fld.,.....ss 3 ss.
Syr. simp.....fl. 3 iij.

M. S. 3 ss. every two hours.

"I directed the above to be used until profuse sweating was produced, which occurred after the third dose in such profusion as to saturate the linen thoroughly, and continued for several hours. As soon as the sweating became thoroughly established the temperature and pain (which before had been excessive and severe) was reduced and relieved, and the symptoms, which were so threatening the day before, were all gone. The debilitating effect of the sweating passed off in a few days, since which time the patient was in excellent health. I have had no other opportunity to test the remedy

in this class of cases, but have the utmost confidence in its virtue.—*The Medical Record*.

TREATMENT OF THE ALBUMINURIA OF PREGNANCY BY JABORANDI.—Dr. Langlet (of Rheims) successfully employed jaborandi in a case in which the rapid course of the symptoms did not allow time to have recourse to the milk diet, which has been so successful in the albuminuria of pregnancy. In this case, reported by the author in *L'Union Médicale de l'Est*, a woman three months advanced in pregnancy had presented oedema of the legs for six weeks. For some days she had been subject to an oppression so violent as to place her life in jeopardy; the quantity of urine, excessively small and highly charged with albumen, was in no way affected by the ordinary diuretics; the symptoms which precede or accompany eclampsia were already present, and the question of the induction of abortion had been broached. It was at this juncture that three grammes (45 grains) of jaborandi leaves in infusion were administered; the same day an abundant salivation was produced; the diaphoresis was insignificant, but instead there was an augmentation in the quantity of the urine voided—a quantity which became quite considerable during the following days. The patient thus took the jaborandi for sixteen days without interruption, and in this space of time resorption was gradually accomplished, the liquid effused into the pleuræ disappeared, and all the general symptoms amended. The albumen also progressively decreased, so that at length there was no longer the slightest trace of it in the urine, and the accouchment was accomplished under excellent conditions, the child being healthy. M. Langlet supplemented this observation with some interesting reflections. In the first place, in this case, the jaborandi was given in a continuous way, whilst ordinarily it is given for periods, more or less separated from each other, lasting two or three days each. In this case M. Langlet acted as he did because he desired to procure a continuous action of the remedy. This method of administration has had one drawback, which is that it produced a veritable hæmaturia, the result of the excess of work thrown upon the kidneys, and of the congestion which accompanies it. This hæmaturia, however, has had no untoward results, but it probably might have been avoided by giving the remedy at intervals. M. Langlet also remarked that increase of the urinary secretion is not usually noted among the effects of jaborandi, although M. Rendu had previously remarked it. It is the sweat, and more especially the saliva, whose secretion is excited by the remedy.—*Lyon Medical*.

ERYTHROXYLON COCA.—*The Boston Medical and Surgical Journal* recently contained an article on Coca, by G. Archie Stockwell, M.D., which presents some interesting facts in relation to the production and uses of this drug, and especially its therapeutical properties. We quote only a portion:

“Like cinchona, the peculiar powers of coca have been introduced to the notice of the Caucasian by the aboriginal inhabitants of the country to which it is indigenous. No historical records inform us when it was introduced to their notice, or who first discovered the hidden properties of its leaves. When the empire of Atahualpa was overthrown by the rapacious Pizarro, coca was as well known to the Peruvians as at the present day, and played an important part in their religion, being used in all public ceremonies as an offering to the sun-god.

“Although found in a wild state, like most other

shrubs it is enhanced in value by cultivation, and hence none but the carefully nurtured domesticated variety finds its way to market. The sultry valleys of the eastern slopes of the Andes are most favorable to its growth, and it is here that a most systematic method of cultivation is adopted, the plant being raised from the seed.

“When the young shoots have attained a height of about fifteen inches they are transplanted in rows of a foot or more apart; when full grown they rarely exceed sixty-four or seventy inches in height. As it thrives best in damp situations, sheltered from the sun, it is customary, when such localities are not available, to plant maize between the rows because of its rapid growth, its leaves soon furnishing the required shelter. Certain species of palms are used for the same purpose. If no rain falls, the shrublets are subjected to copious and repeated drenchings.

“Like the coffee-tree, coca has a lustrous green foliage with white blossoms which ripen into small red, or rather scarlet berries. When the shrub has attained an age of eighteen or twenty months the foliage is stripped for the first time, the leaves now presenting an appearance not unlike those of the tea-plant, being oval, pointed, and two or two and a half inches in length, with half that breadth at the widest part, and furnished with short, delicate foot-stalks; unlike those of the tea shrub, they are not dentate, and may be readily distinguished by a curved line running from base to apex upon either side of the midrib. The foliage is known to be ripe for plucking when the leaves become sufficiently brittle to break upon bending. After stripping, the leaves are spread out to dry upon woollen blankets in the sun, great care being taken to prevent absorption of moisture, which is known by the leaf acquiring a brown tinge; when properly cured it retains a pale green color. When the curing is completed the coca is packed in bundles or sacks of an arroba (twenty-five pounds) each, and carefully covered with dry sand until desired for the market. Coca never produces a depressing action, except as the result of an overdose of small quantities so frequently beneficial.

* * * * *

“Tschudi, cites as examples several Indians who, never allowing a day to pass without at least three coceadas, attained the truly patriarch age of one hundred and thirty years. As the ordinary food of the native Peruvians consist almost exclusively of roasted maize, barley, or seeds of the quinoa, which are eaten without any addition, they suffer with frequent and obstinate obstructions and derangements of the digestive system, which are entirely obviated by the use of coca. From the time the native becomes a coquero the trouble ceases, never to recur, except with the abandonment of the habit.

“In moderate doses coca causes increased arterial activity, stimulates the alimentary secretions and peristaltic action, diminishes weariness, strengthens the pulse, calms nervous excitement retards waste, facilitates repair, alleviates spasms, and increases mental activity; in fact, it is an economizer of vital energy, and an effective aid to nutrition. It invariably contributes to mental cheerfulness, and withal not unfrequently causes unequivocal aphrodisia.

“Although one cannot look upon coca as a food, it will be found second only to alcohol in its food-replacing power; for this reason it will undoubtedly prove of value in low forms of fever.

“In large doses it has a decided action upon the kidneys, producing also watery stools, and, when long continued, gives to both urine and fæces a

highly offensive odor, and renders the latter so acid as almost to destroy all vegetation with which they may come in contact; it also renders other excretions, as those of the lungs and skin, offensive. In these large doses it does not seem to affect the visual organs, as the pupils will be found freely contractible on the approach of light, and unless the doses are very heavy the eye presents an expression of combined merriment and cunning. Hunger seems never to be induced, but rather the contrary; yet, if the patient be coaxed to partake of food set before him, he eats voraciously.

"Of the physiological and therapeutical action of coca there is much to be discovered. It has been lauded as a hypnotic, yet its uncertainty of action will prevent its ever superseding the many other drugs of far greater value that we possess. It is, however, anodyne and antispasmodic, exerting special influence upon the brain and spinal cord, and from its action upon the pneumogastric it will undoubtedly prove of benefit in certain forms of asthma. Its antispasmodic action has been vouched for by numerous South Americans. It is used by the natives to promote uterine contractions. When inertia has supervened, I am told by Spanish American physicians that its effect is both speedy and certain. In melancholia, or where nervous depression exists, its action in promoting cheerfulness is marked, and its influence upon the digestive functions, before noticed, will doubtless cause coca to be prescribed for many of the diseases of so-called dyspeptic character, and those irregularities arising from non-assimilation of food.

"It is certain of the Bolivian Indians inherit from their ancestors a mode of preparing and administering this drug so as to produce a cataleptic state so profound as to simulate death beyond detection, from which the patient may be aroused after the lapse of a few hours without serious results. I believe a mixture of cannabis indica, opium and certain other narcotics is used for the same purpose by the initiated among Orientals.

"Coca will produce sleep oftentimes when opium has failed, if given in repeated small doses for a little time before retiring to rest, in order to allow the preliminary stage of excitement to pass off; but, as a rule, it is inferior to the opiates, its action being extremely variable.

"For the last few years it has been fashionable to claim for every new drug a decided antiperiodic action, vaunting for it all the powers of quinia, and coca has not escaped. Administered in conjunction with quinia, it will, I doubt not, like opium, oftentimes prove a valuable adjunct. Give quinine to a confirmed coquero, at the same time depriving him of his solace, and you will frequently be disappointed in its results. Restore him his coca, and the action of the salt will be both speedy and certain. I have observed like results when prescribing for consumers of tobacco.

"From the action of coca as observed, the writer would give it to a patient suffering from cholera, with the expectation of happy results; its action is rapid, and vomiting and cramps would, I think, speedily yield to its influence. Larabie, Williams and other travellers have experienced almost instantaneous relief from coca when suffering from cholera morbus. Dr. Carvallo informs me that he has observed similar results from an infusion, and has known even the chewing of the leaf to act favorably. I have witnessed the same effects myself. It would not be at all surprising if it were prove that the coca caused a marked increase of the binary secretions. I should also expect marked results from it in congestive chills, and particularly

with flannels wet with ammonia spirits in which quinine has been dissolved to saturation, applied to the abdomen, as practised in Central America. But it is in hypochondriacal diseases that we may look for the greatest benefit from coca.

"I trust that the profession will thoroughly examine into the merits and demerits of the article, and give the full negative results of their investigations. I say negative, for that is the evidence demanded at the present day. We are overrun with positive evidence, all virtues being ascribed to all remedies to such an extent that we become lost in seeking information. What we now need to know is what medicines will not do.

"It will probably be found that the dose required for our climate will be much larger than that demanded in Peru.—*New Remedies.*

ÆSCULUS GLABRA (OHIO BUCKEYE).—

This remedy has a very wide range of action, but like all polycrests, it has a central point of action, from which radiates a series of secondary or reflexed actions. This central point of action is upon the portal system and the liver. It resembles collinsonia, aloes, nux vomica and podophyllin in its action upon the portal circulation. It is more powerful than æsculus hippocastanum in its action. In congestion of the liver, when accompanied with hemorrhoids, with aching, pinching pains, it may be relied on with confidence. I have used this remedy in quite a number of cases of hemorrhoids with the most positive results. In constipation, with hard, knotty, dry stools, of a light color, it is one of our most positive remedies. In all cases of hemorrhoids, where the tumors are protruding, or internal, and are hard, purple and very sore, with aching or throbbing, burning pain attending them, the æsculus may be relied on with confidence. In cases of rectal irritation, attended with soreness, constriction, fullness, dryness, and a sensation as if a stick, splinter, or some other foreign substance was lodged in the rectum, this is the remedy indicated. In prolapsus ani it may be given internally, while the persulphate of iron is used locally, and these remedies will effect a positive cure. Its action upon the venous system is as undoubted as that of collinsonia. Its action also upon the mucous membranes is apparent. It acts equally well in congestion of the uterus, especially the congestion of the cervix uteri attended with painful menstruation. In prolapsus, retroversion, induration, and ulceration, after the replacement of the uterus, given internally in small doses of the tincture, it is a valuable remedy, and may be accompanied with other treatment deemed necessary, such as a wash of permanganate of potash where there is ulceration, and the wash of the persulphate of iron in prolapsus uteri. I used the saturated tincture in doses of from three to five drops, three times a day, and it should never be given in toxic doses.

If the æsculus is given after the above indications, it will be found a very trustworthy remedy in piles, either external or internal. And as hemorrhoids is a disease that often proves obstinate and exceedingly annoying, we should hail this as a rich boon to the profession, as well as to the subjects of this painful affliction. And again, we often meet with obstinate cases of constipation, from a want of biliary secretion, and a state of inertia of the bowels, which are readily overcome by the use of small doses of this remedy, given for a few weeks, three times a day. There are many cases of congestion of the uterus and the cervix uteri, which hitherto have proved quite obstinate to the profession. Many of these cases yield to the constant use of the æsculus, in small doses, given for a month or two, three times

a day,—I. J. M. GOSS, M. D., in the *American Medical Journal*.

MEDICAL USES OF CEREUS GRANDIFLORUS AND CEREUS BONPLANDI, OF MEXICO AND CENTRAL AMERICA.—The cereus grandiflorus, like cereus bonplandi, spoken of in the January number of this journal, is a new remedy, but also one of inestimable value to the physician. I am requested by several readers of this journal to give my experience in the use of these two plants. I have been using the cereus grandiflorus for two years, in various diseases of the heart, and would not be without it for any consideration. I cannot illustrate its value in any better way than by detailing a few cases that I have treated with it.

CASE 1ST—Mrs. McSwain, a lady about fifty years of age, nervous temperament, and formerly of Minnesota, called me in to see her. I found her with violent palpitation, cold extremities, clammy sweats, and great prostration. I examined the heart carefully, and found the distinct bellows sound, rapid pulsations of an enlarged heart from dilatation. She informed me that she had suffered from this disease for several years, and often sought for relief, but, as yet, had found no remedy that afforded any permanent exemption from her sufferings. I prescribed the cereus grandiflorus, in five-drop doses, every two or three hours, alternated with collinsonia, in doses of ten drops, three or four times a day. Under this treatment she rapidly improved, until she regained her health, and returned to her home in the Northwest.

CASE 2D—I was called to see Mrs. Venable, at Adairsville, Ga., who had been treated by a number of physicians, and last, by one in Atlanta, Ga. On examination I found her with violent palpitation, which was a sympathetic affection of the cardiac plexus, resulting from prolapsus uteri, and a persistent leucorrhœa. I put her at once upon the tincture of cereus grandiflorus, together with a wash of persalt of iron—the first for leucorrhœa and the iron for the prolapsus. Under the use of cereus grandiflorus she soon recovered from her heart troubles; and under the above washes and tonics, she is fast recovering from the prolapsus uteri. In that very painful affection of the heart—angina pectoris—(*cramp of the heart*)—we have no remedies so prompt and reliable as the cereus grandiflorus and cereus bonplandi. The bonplandi being, perhaps, the most active of the two. In my practice, I frequently meet with cases of organic and sympathetic palpitation. In organic disease of the heart, as chronic endocarditis and peri-carditis, the bonplandi, doubtless, is the best; and if persevered with for four or five months will frequently allay the inflammation. In valvular disease, the grandiflorus or the bonplandi, alternated with collinsonia, will often relieve the trouble. Is it an arterial sedative?

Answer—It doubtless acts as an arterial sedative in large doses, but is not as reliable in that excited state of the circulation that attends inflammatory diseases as aconite or veratrum; but in those peculiar conditions that attend organic or sympathetic affections of the heart—the want of power in the heart from nervous depression, causing feeble, quick, but irregular pulsations—*palpitation*—then the cereus grandiflorus or the cereus bonplandi is the remedy needed, and will act promptly. They seem, either of them, to quiet and tone up the cardiac nerves, and thereby restore the equilibrium of action, the very thing wanting in most cases of heart disease, where palpitation is a prominent symptom. In organic diseases of the heart, they quiet excitement of the heart, and thereby give rest, and hence aid in the final cure. The cereus grandiflorus and cereus

bonplandi are comparatively new remedies, but destined to take rank with other good remedies lately introduced to the profession. The bonplandi is a Mexican plant, and can be had, I guess in San Francisco, Cal.—I. J. M. GOSS, M. D., in *The Medical Brief*.

CARBAZOTATE OF AMMONIA.—Some time since I asked through the Journal for information in regard to the opinion of physicians in the use of this remedy. The following letter came in reply, but was mislaid:

“You asked in one of the Journals for experience with carbazotate of ammonia. I have experimented with it some for the last two years, but have laid it on the shelf, at least, as far as intermittent fever is concerned. It seems to have an action somewhat similar to belladonna, producing dilatation of the pupils and calming the cerebrum. I have used it in doses of one-eighth and one fourth of a grain, repeated every two or three hours. About two years ago I was treating a girl aged about sixteen, in an attack of typho-malarial fever; during the second week she got worse and worse in spite of every thing I could do; her tongue was dry and cracked and very sore, her throat so sore that she could hardly swallow any thing. She was very delirious at night, they could hardly keep her in bed; in the forenoon there was a slight remission in the delirium but she never slept any during a whole week. At this period I gave carbazotate of ammonia in one-fourth grain doses until four doses were taken when she went to sleep and slept some during the afternoon and all night. I repeated the prescription once or twice, but improvement did not go on any farther, her throat remained sore and dry and her tongue dry and dark red with blood chaps, also on the lips dry crusts, but but the fever and delirium and sleeplessness were gone and did not return. At about the sixteenth day of treatment I was, through the influence of neighbors, dismissed, and Dr. E. of this place called in; he told them she had no fever at all but a menstrual disorder. After about three weeks more she recovered, and to prove that my diagnosis was correct, some other members of the family (males) who were not affected with amenorrhœa, were taken down with a similar disease. I think the young lady would have died if she had not got rest.—J. J. FREY, M. D., in the *Eclectic Medical Journal*.

PICRATE OF AMMONIA IN INTERMITTENT FEVER.—There has been in this section of the country more cases of intermittent fever this year than I have ever known before. All varieties—masked, marked, and latent, and all types—quotidian, tertian, and quartan, constantly appearing and recurring. Babies, young people, and “old folks,” none are exempt. As a consequence we have prescribed a variety of remedies. Chief and first, chills’ panacea, quinine. But a great many stomachs refuse to retain the enormous doses required to “break the chills.” Even when they were broken they are missed but once or twice. Cinchonidia, from its cheapness, demanded a trial, and was in several cases successful, as much so as quinine. Fowler’s solution was called into requisition, and was an efficient remedy in a number of cases of long standing, yet relapses occurred, and it seemed to lose its virtues. On the 17th of October we commenced using picrate, or carbazotate of ammonia.

CASE 1.—Mr. M., aged forty-five years. Has had chills, tertian type, for seven weeks, held partly in check by quinine, cinchonidia, and arsenic. For last two weeks has had chill every second night, though taking forty-five drops of Fowler’s solution daily. Prescribed grain doses of picrate ammonia twice a

day till six doses were taken. Patient has not had a chill since. On fourth day after, repeated the prescription for fear of relapse.

CASE 11.—Child, aged three years, tertian type. Came into my hands after having taken calomel, quinine, etc. Gave Fowler's solution. Chills checked for a few days, but repeatedly recurring. Prescribed one-sixth grain doses picrate ammonia twice a day for three days. No more chills. A few days after repeated the prescription. Child well.

CASE 111.—Mrs. S., aged twenty-eight years. Chills for five or six weeks, beginning with slight attack of remittent fever. Quinine in five-grain doses every two hours till four were taken. A chill or two missed. Six grain doses of cinchonidia, repeated five or six times; failed. Arsenic for a length of time without effect. Gave grain doses of picrate of ammonia twice a day for three days; no chills since.—J. W. SNIDER, M. D., in the *Ohio Medical Recorder*.

PHOSPHIDE OF ZINC.—The phosphide of zinc has so far proven a most efficient agent in the successful treatment in the major part of a certain class of affections. In very many instances it has been far more curative than phosphorus. Considered in the light of a curative agent the phosphide of zinc stands alone, not only for the certainty but for the rapidity of its action as a nervous tonic and stimulant. Its value in these respects has of late been fairly tested in the last and exhausting stages of typhoid and other fevers, where the nervous energies have been so far prostrated as to render convalescence, if not doubtful, at least tedious and protracted. The great therapeutic value of the phosphide of zinc is evinced in the most distinct manner when used in the treatment of neuralgia. While the phosphorus is seldom curative in doses less than one-twentieth of a grain, often calling for as much as one-tenth or one-fourth, the phosphide of zinc yields as reliable and more speedy results in doses of one-tenth to one-eighth of a grain. But few stomachs can tolerate more than one-thirtieth of a grain of phosphorus before manifesting symptoms of irritation, which, in connection with the "matchy" taste soon evolved in eructations, often engenders a disgust to its further continuance. Nor are these disagreeable features altogether abolished by any of the multitudinous formulæ now in vogue. On the other hand, experience with the phosphide of zinc has proven that it enters the circulation far more rapidly than the element, and when administered in doses of from one-eighth to one-twelfth of a grain, it produces its curative influence far more readily, and is equally as permanent in therapeutic power. It has been found to be extremely serviceable in neuralgia in doses of one-eighth of a grain in the form of a pill, in angina, in loss of memory, impotence, in loss of sleep from continued mental anxiety, and generally in those nervous affections that owe their origin to exhaustion and depression of the nerve force. Dr. Hammond's formula is one-sixteenth of a grain of phosphide of zinc, with one-fourth of a grain of extract of nux-vomica made into a pill.—*New Remedies*.

THE THERAPEUTIC ACTION OF NITRITE OF AMYL.—Dr. J. Maximowitsch (*St. Petersburg. Med. Wochenschrift*, No. 12, 1877,) has used nitrite of amyl for its therapeutic effects in the following affections, and with the results mentioned below:

(1). Of sixteen cases of migraine in which it was employed, twelve were completely relieved. Even after the first inspiration the patients felt decidedly better. In one case, in a weak and nervous

woman, the inhalations had to be practised eight times in an hour. In another case its use caused such "distress" that it had to be abandoned. In the remaining cases (two in number) it produced no effect whatever.

(2). In two cases of facial neuralgia having no apparent connection with malaria, rapid improvement followed the administration of amyl.

(3). In a case of giddiness due to anæmia of the vessels of the brain, which was itself due to a general deficiency of blood, complete relief followed inhalations of amyl nitrite, accompanied by the use of iron internally. In another case, in which the vertigo was due to dyspepsia, relief was obtained after two inhalations. In a third case of vertigo, however, which was also due to dyspepsia, no effect was produced.

(4). In hysteria and hystero-epilepsy, even when there is not a complete cure, very great improvement may be obtained. In a very severe case of hystero-epilepsy, in which the paroxysms were almost an hour long, and which had proved rebellious to ice compresses to the head, inhalations of chloroform, &c., the inhalations of five drops of nitrite of amyl gave complete relief. A second attack was cut short in the same manner, and the patient was cured by this, together with the simultaneous use of other nervines.

(5). For fainting spells he considers the amyl far superior to anything else.

(6). In a case of epilepsy, its use will cut short an attack, or prevent it when there is a premonitory aura; and in connection with bromide of potassium and atropia, the convulsions have been prevented for four months.

(7). In headache from defective innervation of the vessels, whether due to disturbance about the stomach or to cold, its use will give good results.

(8). In five cases of poisoning by carbonic oxide great benefit was obtained from the inhalation of amyl, the patients being restored to consciousness thereby.

Dr. M. is led to the following conclusions, as a result of his experience in fifty cases:

(1). Inhalations of from five to twenty drops of nitrite of amyl, dropped on wadding, is attended by no danger whatever; and,

(2). Its use is indicated in all diseases which are attended by, or due to defective innervation of the vessels. In all such cases it is very beneficial.

[It has been conclusively proven that nitrite of amyl dilates the smaller blood vessels, and hence, in cases of congestion about the nerve centres it would seem to be contra-indicated. The first experiments of the Translator induced him to think that this drug increased the power of the heart; but on further investigation this proved to be a mistake. The blood pressure is considerably lowered in dogs by the use of amyl. The way in which it increases the amount of blood in parts supplied by small vessels is by diminishing the arterial tension and causing a dilatation of the arterioles.—W. C. D.]—*Virginia Medical Monthly*.

DIALYZED IRON.—If all that is claimed for this preparation be true, it is by far the most valuable form in which iron can be administered in many cases. There is high authority in support of its value. Becquiral, the celebrated French scientist, gives it unqualified praise, and it has been used in France for some time, with satisfactory results. It has been more recently introduced into American practice, and appears to be growing rapidly into favor in Philadelphia and elsewhere. Its mode of preparation is

well known to chemists and there is no secrecy in connection with it. It is a concentrated solution of peroxide of iron, without odor, and without the styp-tic taste of ferruginous preparations in general. It may be given in the same doses as the ordinary perchloride tincture. As a chemical antidote to arsenic, it is claimed to be fully equal to the hydrated sesquioxide, and it has the advantage of being always ready for immediate use. Becquel says of it, that it produces no gastric disturbance of any kind, and no constipation, and that it never discolours the teeth. Not yet having had an opportunity of giving it a sufficient trial, we cannot speak from experience, but the testimony in favor of it is too strong to be disputed.—*Pacific Journal*.

TINCTURE OF NUX VOMICA, FOR NAUSEA AND VOMITING IN PREGNANCY.—Having, some years ago, presumed to call the attention of the profession to the value of this remedy (for it is not new, or this application of it original with me), I would not dare do so again, were it not that I noticed in a recent article from the pen of an eminent gynæcologist the following—the italics being mine: “Various remedies have been recommended which *occasionally* succeed (in relieving nausea and vomiting in pregnancy) but not unfrequently fail to afford the desired relief. I venture to report the following cases, in the hope that others may be induced to add chloral to the long list of drugs which *occasionally* afford relief to patients suffering from this most distressing symptom.”

Now I do not doubt that the *chloral* is a good remedy for the trouble in question; but must earnestly insist that tincture of Nux Vomica, when administered as I shall hereinafter direct, is not a remedy that will only *occasionally* afford relief to patients suffering nausea and vomiting in pregnancy; for experience has assured me that it will promptly relieve such cases, in the great *majority* of instances.

I usually administer the remedy about as follows:

R. *Tinct. nucis vom.*,

Liq. bismuthi, of each ½ oz. M.

Sig. Teaspoonful three or four times a day, a dose just after each meal.

In some very bad, neglected cases it may be necessary for the patient to take a light breakfast in bed for two or three days at the beginning of treatment.

During the last year I have used, with gratifying success, the granular effervescent citrate of bismuth, pepsin and strychnia. It has the advantage—an important one—of being quite pleasant to take; but probably it is not so efficient as the tincture of nux vomica, as above directed.

Where the patient is very fastidious as to *taste*, I sometimes administered strychnia granules, one-twentieth of a grain three times a day, just after meals, with the desired effect.

In a few aggravated cases, not wishing to wait to see if the above prescribed treatment would give relief, I have used the constant galvanic current with success, by applying one pole over the uterine region, and moving the other up and down the spine, and over the epigastric region, for fifteen to twenty-five minutes, just after each meal.

Certainly, with a well-directed use of the remedies I have mentioned we will not only be able to “occasionally” relieve nausea and vomiting in pregnancy, but will surely be able to do so in almost every case, if not complicated with some organic disease.—G. C. Smith, M.D., in *Pacific Medical and Surgical Journal*.

GRINDELIA ROBUSTA AND ITS USE AS A REMEDY FOR IVY POISONING.—James G. Steele, of San Francisco, writes to the *Scientific American* that the *Rhus toxicodendron* is a very common cause of a great deal of misery and suffering in California, and contributes a paper on the properties of *Grindelia robusta* as a remedy, from which the following is taken:

“Dr. L. A. Canfield (deceased) of Monterey, Cal., was the first,” so Mr. Steele says, “to call the attention of the medical profession to the therapeutic action of *Grindelia robusta* in cases of ‘Oak Poisoning.’ Some twelve years since he caused to be published, in the *Pacific Medical and Surgical Journal*, a short account of this plant, its botanical features, habitat, and medicinal value. My attention being thus directed to the plant, I procured specimens, and prepared various pharmaceutical compounds containing the virtues of the drug, which were prescribed by the medical faculty of this city, with sufficient success to warrant me in keeping a bountiful supply of the plant. It has been my practice yearly, during the months of May and June, to go into the rural districts and have gathered and dried in the shade one or two tons of *Grindelia robusta*.

It may be presumed that the medicinal virtues of the *Grindelia robusta* reside in the viscid and resinous juice before mentioned. Confirmatory evidence offers itself in the fact that the plants gathered from the lower and marshy grounds are more robust and succulent, the leaves and stalks larger and coarser in appearance and devoid almost entirely of the “balsam” before mentioned, and have little efficacy in the eruption of Oak Poisoning. The directions for its employment are as follows:

“For Poison Oak eruption, the best method is to mix one or two teaspoonfuls of the strong fluid extract of *Grindelia* with half a tumbler of cold or tepid water, and apply freely with a sponge or cloths dipped in the mixture to the parts affected. One or two applications will often suffice for a cure, but if the disease has been of long duration, several days may elapse before entire relief is obtained. In severe cases of poisoning, cloths dipped in the solution may be bound upon the parts, and, if necessary, more of the fluid extract added. The most obstinate case of poisoning will be overcome by this mode of treatment, and immediately after the first application the most surprising relief is experienced. Another medicinal use has been found for *Grindelia* and its preparations. *Asthma* and kindred ailments have been made to succumb in a remarkable manner. For fear of tiring the patience of your readers and with a due regard to the value of space, I will forbear further mention of this, save to remark that in case it may prove of interest to excite inquiry, something could be written of our experience of the value of the drug in this connection.

“The *Grindelia robusta* and its various medicinal preparations can be found in well-appointed pharmacies in the large Eastern cities; and in case none is to be had at hand, application to the writer will result in discovering a way to procure it in any desired quantity.”—*New Remedies*.

WHEN NOT TO GIVE IRON.—In the current number of the *Practitioner* Dr. Milner Fothergill has contributed a few practical remarks on the contra-indications for giving this drug. As long, he says, as there is rapidity of pulse combined with rise of temperature, so long must Iron be withheld in the treatment of acute disease. As long, more-

over, as the tongue is thickly coated, or red and irritable, it is well to withhold chalybeates altogether. This is particularly true of phthisis. No matter what the other indications are, it is useless and sometimes worse than useless to give it without the tongue be clean without irritability.

It may be laid down as a general rule that this toleration of iron diminishes as the age increases. Young children take iron well, and it is often well borne by them in conditions which in the adult distinctly forbid its use.

There is one condition where iron is absolutely forbidden, and that is the condition known as biliousness. As long as there is a foul tongue, a bad taste in the mouth, and fullness of the liver, with disturbances of the alimentary canal, iron is not only of no service, but positively does harm. Sir Joseph Fayrer's Indian experience is in full accord with this expression of opinion. In speaking of the treatment of hepatic congestion, accompanied by anæmia, he lays stress upon the resort to purgatives and vegetable tonics and the avoidance of iron until the biliary congestion is removed. "When the portal circulation is relieved some preparation of iron may be useful."

When given in large doses iron always blackens the stools, but if given in moderate doses and well assimilated this blackening is not so marked. The color of the stools, then, may be utilized as an indicator as to how far chalybeates are assimilated and are likely to be useful.

There are two different states in women where iron is either totally contra-indicated or to be given with great caution. The first is a condition of amenorrhœa in florid, plethoric persons. The other is the opposite condition of menorrhagia in certain females. There are cases of menorrhagia associated with pallor and debility, where the usual compound of iron and extract of ergot is not so useful as a non-chalybeate treatment. In these cases it is not any imperfection in the process of blood manufacture which is to be remedied, for the blood is made rapidly and quickly, only to be lost at each menstrual period. It is here desirable rather to limit the rapidity of the blood formation, so that when the several vascular turgescence of the menstrual period comes, it will not find the blood-vessels too distended with blood. This will lead to diminished catamenial loss, and so the blood-waste will be economised. According to the experience of Dr. Brown-Séquard and Dr. Hughlings Jackson iron does not suit epileptics. It increases the tendency to fits. It may improve the general condition, but it aggravates the epilepsy.—*Press and Circular*.

SALICYLIC ACID.—The following is the substance of the concluding therapeutical summary of an article by Prof. Germain See, running through several recent numbers of *Le France Medicale*.

1. As an external antizymotic medicament salicylic acid has an incontestable action, but does not surpass in this respect phenic acid, and possesses over it no advantage except that of being odorless. As an internal antiseptic it has no appreciable effect, either in purulent affections or in contagious parasitic ones, such as diphtheria or thrush, or in gangrene, or finally, in diabetes.

2. As antipyretic medicines, salicylate of soda and salicylic acid possess transitory and dubious properties, even as against the specific, miasmatic, and virulent fevers, etc., thus it has no marked superiority over the sulphate of quinine; the salicylate of quinine itself cannot yet take any definite rank in the therapeutics of the palustral fevers. Without power in the cure of variola, the salicylate of soda has not yet given proofs of its efficacy in the

treatment of typhoid; its febrifuge power is very limited.

3. It is in acute articular rheumatism that we observe the surest and promptest effects, so indeed that we can always at once predict a cure of febrile or apyretic rheumatism within from two to four days; 51 cases in evidence.

4. In simple chronic rheumatism the trials I have instituted were very satisfactory; also in the acute crises which manifest themselves from time to time, either in the form of simple rheumatism, or even in that of nodular arthritis, the painful attacks cease as soon as in the case of acute rheumatism. More than this, the articular engorgements diminish to a considerable extent, and the movements may become free, even after years of pain, rigidity and immobility, on condition only that the osseous lesions be not too advanced and serious; (eleven observations of chronic rheumatism cured or ameliorated.)

5. But it is in acute and chronic gout that the results are most remarkable; in my first trials I was struck with the promptness with which the most painful acute attacks were relieved, in the course of from two to three days the pain, the articular hyperæmia, the redness, the sensitiveness to touch, had all disappeared.

Chronic gout does not take less kindly to the salicylic acid treatment. By its continuous use, even in moderate doses, the patients are absolutely protected from acute attacks.

On the other hand, the chronic peri-articular engorgements readily disappear, the tophaceous deposits of the joints diminish and cease to inflame; in a word, the cure may be complete without producing any metastasis to the heart, the stomach, the respiratory organs or the brain; in no case out of twenty-one which I have been able to follow out, was there the least tendency to retrocession of the gout toward the internal organs.

No other inconveniences were experienced than the development of trouble of hearing, and sometimes a certain degree of feebleness or of narcotism; these two last disappeared with the decrease of the dose. the disorder of audition was rather more persistent.

Among the affections, often of a gouty nature, we may mention the gravel, which is very favorably modified, or rather is very easily eliminated, by the aid of salicylate of soda, which has the further advantage of calming the nephritic pains.

6. The salicylic treatment seems to advantageously modify certain facial neuralgias, but this action is not definitely established; the same is the case with the treatment of sciatica by this agent.

7. In painful affections of the spinal cord, salicylate of soda produces calmative effects, very clearly appreciable; but with the continuation of the treatment a certain degree of weakening may result.

M. Laborde, in reponse to this assertion of M. See, "The cutaneous and general sensibility is not modified under the influence of salicylic acid," showed to the Soc. of Biologie, July 28, (rep. in *Gaz. des Hopitaux*) a dog, into the femoral vein of which he had injected, twenty-four hours previously, four grammes of salicylate of soda, and which presented a profound and absolute anæsthesia of the whole cutaneous surface. In opposition to M. See, therefore, M. Laborde believed that he could affirm that salicylic acid possessed analgesic properties.—*Toledo Medical Journal*.

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NEW PREPARATIONS.

Vol. 2.

Detroit, April 15, 1878.

No. 2.

Original Communications.

A Nucleus in the Red Blood-Corpuscle.

BY CHAS. H. STOWELL, M. D.;

Of the Physiological Laboratory of Michigan University,
Ann Arbor, Mich.



T your request I give you the method employed to demonstrate the presence of a nucleus in a red blood corpuscle.

In the *Archiv. fur Mic. Anat.*, Bd. 4, Professor Böttcher gives the results

of some researches on this subject, confirming him in the belief first advocated by Rollet.

I give you his method of procedure.

He uses a saturated solution of corrosive sublimate in 96 per cent alcohol, and into fifty volumes of this solution, one of blood is to be rapidly diffused.

By this means the coloring matter of the corpuscle is taken out—bleached—and thus the internal structure brought more clearly to view. This solution preserves the corpuscles as well.

By agitating the mixture now and then the process is hastened, and in about twenty-four hours the corpuscles are allowed to subside, the supernatant fluid poured off and pure alcohol added to a like amount.

In another twenty-four hours this is poured off and distilled water added. The corpuscles are now thoroughly washed, and are not acted upon by the water.

Professor Böttcher employs eosin, hæmatoxylin, picric acid and carmine as staining agents, but prefers the first.

He finds three classes of corpuscles:

First. Homogeneous and shiny throughout.

Second. Added to this a granular mass in the center which stains readily.

Third. Besides the cortical layer and protoplasm, inclosed in the latter is a marked nucleus and nucleolus.

Some blood was examined from a man poisoned with an alcoholic solution of corrosive sublimate with the result of finding nuclei in the corpuscles.

A review of this paper of Professor Böttcher's can be found in the November and December number of the *London Monthly Microscopical Journal*.

The method given above was strictly carried out at our laboratory, and I was thus able to demonstrate to my class the presence of this nucleus, and several of the members of the faculty examined the specimens as well.

Carmine was used exclusively as the staining agent, and the most satisfactory views were obtained from using a one-twelfth immersion.

There was a very marked difference between the appearance presented by a so-called "cup-

shaped" corpuscle and one containing a nucleus. There is not only a difference in the shape, but when a current is established in the field, and the corpuscles thus made to roll about, the contrast is very marked.

I found the great majority of the corpuscles to belong to the first class, while one with a nucleolus also was very rare indeed.

I propose to make a series of experiments on different mammals, poisoning them with corrosive sublimate, with respect to further deciding this question, when I shall be pleased to give you my results.

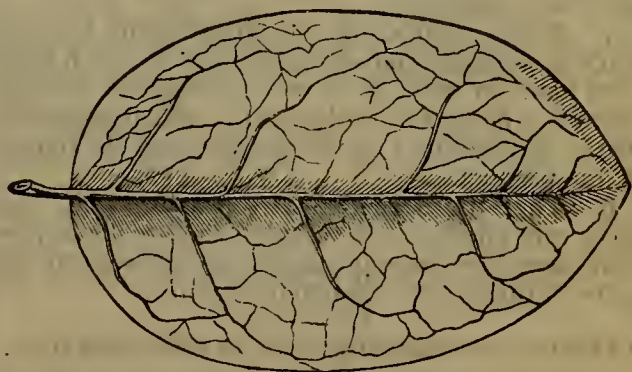
Boldo.

BY CHAS. W. ZAREMBA, M. D., PH. D.

Member of the "Sociedad Medica," Santiago de Chile,
Academy of Natural Science, Philadelphia, Pa., etc.



THE Boldo (*Boldoa fragrans*—Pavon: *Peumus Boldo*—Mol: *Ruizia fragrans* Ruiz i Pavon), of the family of the Monomeacias, is a very luxuriant tree of fifteen to twenty feet high, growing on the hill-sides of the central provinces of Chili, as far down as Oxorno (Province of Valdivia) and is indigenous to that country. This tree is very aromatic, whence it derives its name; bears oblong, coriaceous, very strong and rough leaves set opposite each other; flowers are collected in



little bunches; fruit small and of yellowish color, very sweet and aromatic. In the country the fruit is eaten, but always in small quantities on account of their clogging sweetness, and the slight heat thereby produced in the mouth. The oldest travelers inform us that the Boldo was known and used since immemorial times by the natives of the country in infusion against rheumatic complaints, in syphilis, ulcerations of the mouth, etc.

About the latter part of 1870 the boldo sprung into fashion, not only among the farmers, but also among medical men in Chili.

My esteemed friend, the celebrated naturalist, Don Vincento Bustillo (since deceased), a large wool grower, lost very heavily in sheep, dying from worms in the liver; some however, that were only recently attacked, ate the leaves of the boldo from twigs with which the corral fence had been repaired, and recovered entirely. This news spread like wildfire, and the remedy became general in like cases among men, and since that time the boldo has obtained an important place in the therapeutics of liver-complaint, as will be hereafter shown.

The Chilenos (country people I mean) labored under the belief, that boldo was a panacea for the liver, while in fact it only acted in the first place as a vermifuge.

In January, 1872, I first brought the boldo to the United States, using at first the infusion of forty-five grains of the leaves to one hundred and fifty of boiling water; next I used the alcoholic extract. The aqueous extract contains a slightly bitter principle.

The infusion is of a beautiful light yellowish color, of a pronounced aromatic smell, and causes slight heat in the stomach, however little may be drank. The extract is much more aromatic and pungent to the taste, reminding one of turpentine, but its smell is disguised by its essence.

Here I will caution the profession that an infusion surcharged with boldo occasions colic, diarrhoea, and if taken in inconsiderate manner produced even acute dysentery. The dose of the extract is from four to five grains three or four times a day.

In a conference of the "Sociedad Medica," held August 30th, 1871, my colleagues summed up the most important items of the therapeutics of the boldo as follows:

From experiments made and the nature of the product, we may now conclude that the boldo is,

1. A most useful and profitable remedy in *blennorrhagia*.

2. That it produces always good effects in *dyspeptic affections* when we recognize as the cause an *atony* or *debility of the digestive organs*, or *when complicated by bilious disorders*.

3. That its administration has been more than once favorable in *chronic catarrh of the bladder*.

4. That, the boldo being balsamic and carminative, it is an important auxiliary in the treatment of *hepatic abscesses* whenever the febrile symptoms have been overcome.

5. That, considering the observations hitherto made in animals, and also a number of which have been made in man, it is to be presumed that the boldo is a *powerful anthelmintic*, which presumption is corroborated by the qualities and the nature of the product.

6. That the decoction of the leaves may also serve very effectively in washing wine-casks to prevent them from souring; a practice followed by the native farmers since immemorial times.

CLINICS OF THE BOLDO IN BLENNORRHAGIA.

Following in theory the one inducement for its application was its resinous character and the essence obtained from the alcoholic extract, prepared according to Gluber. This extract has been prepared by my distinguished friend and co-laborer, Dr. Adolfo Murillo, and to him I am indebted for the following clinical observations.

1. On the 24th of September, 1870, Dr. M. was requested, by permit of the surgeon, to treat the patient in bed No. 60, in the military hospital, Santiago, Chili. It was a soldier twenty-four years of age, robust constitution and good appearance. Nine days after having had impure intercourse, which manifested itself in a blennorrhagia and swelling of

the groins, he prescribed daily three pills of the alcoholic extract of boldo, each weighing twenty centigrammes. On the 28th (four days afterwards), the affection had entirely disappeared, and the patient regained his health.

2. On the 20th of December, 1870, Dr. M. took charge of the occupant of bed No. 27 in the same hospital; he was a man twenty-eight years old and of good constitution. He had blennorrhagia already for twelve days of an inflammatory character, and being troubled with nocturnal erections. Three pills of the alcoholic extract of boldo were administered, each containing twenty centigrammes of the extract and five centigrammes of camphor; the man felt better after two days, leaving on the 30th entirely cured.

3. December 21st, 1870, I took in charge No. 20 in the same military hospital, and found that he had been affected with blennorrhagia for 15 days. The usual medication, a preparation of balsam copaiba, was unable to give him rest, nor had his condition been improved since he entered the establishment. I prescribed three pills of boldo and camphor, to be administered in the same form and doses as in the other case. The patient left in seven days entirely cured.

The above cases were presented to the Medical College in September, 1871.

BOLDO IN DYSPEPSIA.

It is HERE where the boldo produces its greatest results. I cannot detail the many facts, for the reason that the cases in which the boldo has been used with the highest salutary effects, are so very numerous. Whenever digestion is impaired, the tongue coated, accompanied by pyrosis and torpor of the intestines, I have never given the boldo either in infusion or wine form that it has not had the best effects.

1. C. D. K., a bachelor, forty years of age, of bilious temperament, regular habits, suffered for many years from irregular digestion. Having almost constantly a weight on the stomach, accompanied with indescribable feelings, and with frequent bilious diarrhoea. I gave the boldo in infusion after meals, making liberal use of it, and after the first few days the complaint disappeared entirely.

2. G. A., a monk, belonging to one of the convents at Santiago, and leading a very sedentary life; his digestion was in a very bad condition—dyspepsia making his appearance. I gave him the ordinary infusion of boldo after meals; in two days the symptoms had disappeared, and he joyfully announced his entire recovery.

In the following cases the boldo had been administered in wine, prepared in the usual manner, which will be of some interest to the fraternity.

THE BOLDO AS AN ANTHELMINTIC.

The first observations that I made in regard to the complaint, I was at once convinced that this was the natural remedy for the same, it containing all the properties required. In treating cases coming under this class, I prefer the ethereal extract, which contains more of the essence of boldo.

THE BOLDO IN RHEUMATISM.

I have given it repeatedly in baths in the same form which was used by the Spanish naturalist Ruiz i Pavon in the last century, and by Bertero and others of the present century.

Finally, I have seen in the *Bulletin de Therapeutique* of November 15th, 1872, a notice of the extraction of an alkaloid called "Boldine."

Fucus Vesiculosus.

BY C. W. MANKER, M. D., FARMERS' CITY, IOWA.



ABOUT fifteen months ago I commenced experimenting with fluid extract fucus vesiculosus. I promised at that time that when I had concluded my experiments with the medicine I would inform you in regard to the results. The first case upon whom I used it is the most important and interesting in its results on account of the condition in which I found the patient at first, and the almost magical manner in which the medicine acted. I will therefore give a tolerably complete history of the case.

Mrs. W., æt. thirty-eight years, married for several years, but never bore any children, always aborting at about the second or third month. She was very corpulent, weighing about three hundred pounds. Her menstrual function was very irregular and she was at times affected with amenorrhœa, and at times with dysmenorrhœa. When she had the latter, the pain was in the beginning of her *menstruum* almost unbearable. She was also the subject of severe attacks of palpitation of the heart and great dyspnœa, coming simultaneously and lasting for from a half to one hour, and these attacks were of almost weekly occurrence. She had been treated by different physicians for these difficulties, but with only temporary relief. It was for these troubles that she called upon me to relieve her. After examining her thoroughly and finding no organic disease either of the lungs or heart, I arrived at the conclusion that the plethora and excessive obesity produced all of her sufferings; therefore, acting under the influence of this belief, I requested her to allow me to prescribe a course of treatment designed to diminish her corpulence and plethora, to which she reluctantly consented, and I ordered a bottle of fluid extract of fucus vesiculosus, as I had seen it recommended in your periodical NEW PREPARATIONS, and other works on therapeutics.

When the medicine arrived, I prescribed it at first in teaspoonful doses, thrice daily, before meals, gradually increasing to a tablespoonful; and finally, after taking three bottles, to two tablespoonfuls. At the same time I prescribed a course of dieting, which consisted in excluding from the food as nearly as possible all starchy and saccharine articles, but allowing as much as wanted of all other articles, such as fruits and vegetables, except potatoes and rice, meats of any kind, except pork. Of this liberal diet I allowed her to eat all her appetite craved; and right here I wish to say that the happy result of the treatment was in a great measure due to the faithful manner in which she carried out my prescriptions, both in regard to the dietary and medicine, for from the very first day of the treatment she never missed a dose of medicine, or ate a mouthful of "forbidden fruit."

After she had taken the first bottle, her menstrual function was greatly improved, the palpitation had nearly disappeared and she had diminished in flesh so that the most casual observer could notice it. In all she has taken twelve pound bottles of the medicine, and to-day she claims to be perfectly healthy in every respect. Her menstrual function is *completely and permanently restored*, coming on at the regular time and continuing the natural time, and passing off without hardly a pain. The palpitation of the heart, from which she used to suffer so much, has entirely disappeared, never having the least symptom of it since taking the second bottle of medicine; and in *embonpoint* she has diminished *wonderfully*, weighing at present only one hundred

and ninety pounds. This does not hardly seem reasonable, and yet it is as true as it is that I am writing about it. I am requested to withhold her name, but if any person wishes to correspond with her, they can have her address by applying to me and inclosing a three cent stamp for reply. To use her own words, Mrs. W. says: "I feel better than I have, for years in every respect, and I have not had a pain or an uncomfortable feeling hardly worth mentioning since beginning the use of the medicine."

Now some persons may ask the question whether it was the fucus vesiculosus or the strict attention to dieting that accomplished the result. Indeed I asked myself this question while treating the case, and not wishing to be misled in regard to the effects of the medicine, I determined to ascertain if possible a true solution of the question. I therefore discontinued the medicine for a while, still allowing her to continue the dietary as usual, when the unfavorable symptoms began to return; but, as soon as the medicine was resorted to again, she commenced to rapidly improve; then I discontinued the dietary, still allowing her to take the medicine as usual, but could notice but little change, except that she did not seem to improve *quite* so rapidly as when using the two in conjunction.

I therefore conclude that the *medicine* is the *facile princeps*, or the chief agent in accomplishing the results above mentioned, although the dietary is a valuable auxiliary in the treatment.

Since using the medicine upon this case, I have used it upon others with equally certain results, but not with such rapid action.

In conclusion I will say that for reducing corpulency there is no better or more certain agent known to the profession. It is perfectly harmless, and on the other hand seems to invigorate the system in general to a healthy action, *regulating* the assimilation of the food, and thus overcoming the excessive accumulation of adipose. It is said also to increase the amount of fat, where the system seems to be abnormally deficient. In fact it seems to act by regulating the function of assimilation to a healthy condition, and thus bringing the system to a *natural and healthy* condition.

Again, when there is a functional derangement of the menstrual function dependent upon some fault of nutrition; or from plethora or excessive obesity, the medicine seems to control the disorder with great facility. In fact, any disorder resulting from faulty nutrition, it seems to me, that if I am right in regard to the action of the medicine, it will be a valuable agent in controlling, *e. g.*, tuberculosis, etc.

Furthermore I will say that the fluid extract, when properly prepared, is the most convenient and easiest method of administering the medicine, and Parke, Davis & Co.'s fluid extract of fucus vesiculosus I have found *perfectly reliable* in every case, of uniform strength and pleasant to administer.

Berberis Aquifolium.

BY J. H. BUNDY, M. D., OAKLAND, CAL.



HERE I to state the number of applications that have been made to me to furnish this drug—it would be surprising. And for all that I have so plainly stated that *I could not* furnish it, still the orders come. I have orders from druggists in San Francisco, in Chicago, in St. Louis, in Boston, in New York, and last, but not least, an order to be filled for London. I often think what shall I do? The only answer I can give is this, and *that* to the many who are calling for it, is to apply to Messrs. Parke, Davis & Co. for

it, until their supply runs out. Some houses are advertising the berberis and cascara; but to my certain knowledge no house in the United States other than that of Parke, Davis & Co. has or can have it on hand, from the fact, that at the present season of the year I cannot or no one else supply the drug.

The cases heretofore spoken of are, at this time, as follows: One is well. The case of cancer is not yet quite well, but three weeks will entirely complete the cure. I represented the case as being of nine years' standing, but this is not so; it is of nineteen years instead of nine.

Have been treating a case of ozæna, Mrs. C., from Nevada. Condition: The septum nasi together with the vomer were entirely destroyed, and, in fact, the disease was pushing its way onward in the destruction of everything before it. She was advised to visit this institute, and upon examination I found conditions just as above stated. She had been under many physicians in Nevada, but had received no benefit. Prescribed,

R. *Tr. berberis aquifolium*, four ounces,
Kali iodide, one drachm,
Aqua dist.,
Syrup simplex, each, in sufficient quantity
up to four ounces.

M. S. Teaspoonful four times daily.

R. *Fluid extract yerba reuma*, one ounce,
Aqua dist., three ounces.

M. S. Snuff one teaspoonful three times daily.

The result being that after eight weeks' treatment the patient was discharged cured. I need only to say that the case was a bad one, for could the readers have smelled the breath, they would not doubt of the fact. Have ordered the continuance of the berberis for two months more.

Mrs. R. Severe cough, which has continued for two or more years; much debilitated, pale, cachectic; had tried everything and everybody. Gave,

R. *Fluid extract berberis*, two drachms,
Fluid extract eriodyction, one drachm,
Extract of malt, sufficient up to four ounces.

M. S. Teaspoonful three to four times daily.

In three days the cough ceased, and in one month the patient was restored to health.

You will get other reports of the same kind from Oakland, for they say they are surprised at the action of the berberis, and that they are going to report it. There is one thing I do hope, and that is that no one will attempt to injure the reputation of this valuable drug by attempting to introduce anything claiming to be the same. Many thanks to Messrs. Parke, Davis & Co. for the malt extract, which I find to be very much superior to anything of the kind I ever used. In fact I like to take it myself. Wish I had more.

More anon on this subject.

Berberis Aquifolium.

By H. MALLORY, M. D., HAMILTON, Ohio.

BY your kindness I have on several occasions contributed articles on new preparations through your excellent journal, and by your permission will again call the attention of the medical profession to the fluid extract of berberis aquifolium. At first I thought Dr. Bundy, like all parents, was perhaps a little too proud of his own offspring, and I was slow to give it a trial; and when I did so I selected cases that would give it a severe trial.

On the first of November, 1877, Mr. W. D., of this place, called me to see his two little daughters, aged

respectively ten and twelve years, whom I found suffering from a terrible eruption covering the scalp and extending downwards over the face and chest. I was told by the mother that, in spite of all she could do, the disease had existed over two years, and the mother, by the way, is a very neat housewife. She said she had used all the domestic remedies she could procure, but the disease had now become so bad, and the odor so offensive that she was compelled to take them from school. To make the story short, I diagnosed the disease scrofula, and prescribed the following:

R. *Fluid extract berberis*,
Syrup simplex, each four ounces.

Mix. Sig. Give a teaspoonful every four hours.

The first effect was to increase the eruption, but in four weeks from the time they commenced the use of the medicine the eruption had entirely disappeared, leaving the skin smooth and healthy.

My third case was a young lady, whose family all had shown scrofulous symptoms, some of whom had died of the disease. The lady referred to had been troubled with an eruption confined to the ears and back of the head and neck of six months' standing. One eight-ounce bottle of fluid extract of berberis aquifolium, prepared according to the above mentioned formula, and taken in teaspoonful doses, effected the cure.

Grindelia Squarrosa.

By I. J. M. GOSS, M. D., LL. D., MARIETTA, Ga.



GRINDELIA Squarrosa is represented to act upon the spleen, and as an antiperiodic in chills caused and kept up by enlargement of the spleen, all of which is true, but its range of action is much

wider. I gave it in a case of dumb ague, attended with inaction of the liver, and while it relieved the chills very promptly, it acted on the liver, producing very copious bilious stools every day as long as I gave the remedy; I gave Parke, Davis & Co.'s fluid extract in doses of twenty drops three times a day. This remedy is destined to become one of our most reliable remedies in glandular obstruction. It will be found the remedy in leucocythæmia—a disease of the lymphatic system generally, which is common after attacks of ague and summer fever, and the controlling effects of the grindelia squarrosa over the spleen and other lymphatic glands renders it the remedy in all old chronic cases of ague. I have found nothing so prompt to check relapsing chills as this remedy. There is no remedy that acts more kindly upon the liver than grindelia squarrosa. Its action is not attended by any unpleasant effects, if taken in moderate doses, but in large doses Dr. Bundy experienced toxic effects. The dose need not exceed twenty to thirty drops of the fluid extract. To act upon the glandular system twenty drops is sufficient. It will doubtless be found a fine remedy in all glandular obstructions. I am satisfied that it is a specific for enlarged spleen and other lymphatic glands.

Cascara Sagrado.

By J. H. BUNDY, M. D., OAKLAND, Cal.



SINCE my last paper on this specific for constipation I have been burdened with letters as to how it is to be used in that disease, and how much ought to be given at a dose, where to obtain it, and if I will send it to physicians. While I do not wish to find fault, I must say that it seems strange

to me that physicians reading my papers upon different drugs, where I say I CANNOT furnish or supply them, that they should still keep on sending to me (for it or them, as the case may be, in the way of drugs), seems strange. When I say I cannot, ought to be sufficient to those who read. I will answer all letters with pleasure, who may wish and who send a stamp for reply.

Cascara, as a remedy for dyspepsia and constipation, will never have an equal. Those who understand the action of the gastro-intestinal tract—considering it as a whole—the digestive tract, need but little in the way of explanation, and probably will ask few questions. Have you a case of constipation in which the patient has taken "Ayer's Pills," or some other pills of the same kind, until they have destroyed all the muscular tone of the bowels and the stomach also, prescribe, if you have,

R. *Fluid extract cascara sagrado, one ounce,*
Extract of malt, two ounces,
Syrup simplex, two ounces.

M. S. Teaspoonful three or four times daily, and wait upon the bowels twenty minutes at least every morning and evening, as the case may be, and you will have no trouble in curing any case of constipation caused by abuse or destruction of tone from cathartics.

Have you a case of constipation occasioned by want of secretion from the gastric follicles? If you have, give

R. *Fluid extract cascara, one ounce,*
Fluid extract berberis aquifolium, one ounce,
Extract of malt, two ounces.

M. S. Teaspoonful three or four times daily.

If you have a case of indigestion, in which your patient throws up everything taken, give

R. *Fluid extract cascara, one ounce,*
Extract of malt, two ounces,
Fluid extract berberis, one ounce,
Acid Hydrocyanic, one drachm.

M. S. Teaspoonful directly after meals, or oftener, if there is pain and distress with belching of gas or wind from the stomach. If there is simply constipation, give the cascara alone. If, with any of the above symptoms, there seems to be a sluggish liver, give nux vomica in proper quantity if the cascara does not seem to influence it properly. I speak of nux vomica as simply a resort if need be, but nine times in ten you will not resort to it. If the dose of cascara recommended does *not* produce the desired effect, or produces *too much* action, it is expected that the physician himself *will* and *must* exercise some judgment in its administration as in *all* drugs, and that he will carefully watch its action in every particular. The subject under consideration is one of great importance, and one that more frequently, perhaps, baffles the skill of the best physicians than any other malady, and one that the doctor is generally more willing to let pass by than any other, from the fact that somehow he does not succeed in his treatment, and the patient becomes tired of constantly being "physicked" now and again for the torpid condition of the liver and bowels, but wants something that will restore the general tone of the bowels without cathartics; and in the cascara, with the above combinations, no practitioner will be disappointed, if they observe the pathological indications carefully, and in no other way need the practitioner expect to succeed with any remedy.

To sum up, as a whole, the action of cascara, let me say, that it is indicated where there is laxity, or a want of tone in muscular power or glandular secretion, and that of the mucous membranes also. Many letters I have received from different portions of the United States confirm my own statements in its regard, and more too.

Viscum Album.* Mistletoe.

By W. H. LONG, M. D., LOUISVILLE, Ky.

Surgeon U. S. Marine Hospital Service.



DESIRE to call the attention of the medical profession to the value of the mistletoe as an oxytocic. An extensive experience of ten years with this remedy enables me to speak with confidence as to its properties, and should entitle my opinion to a careful consideration.

I first began to use mistletoe in 1867. The first case was one where the second stage of labor had been protracted for hours by insufficient action of uterus. I had no ergot, and, being several miles from a drug store, could get none. I had seen farmers give it to cows, where the placenta had been retained, and concluded to give some to my patient.

I prepared a decoction of viscum and gave about four ounces, and in twenty minutes strong contractions were induced, and the labor speedily terminated. Since then I have used it in hundreds of cases, and I fail to remember a single case in which a failure to cause uterine contractions occurred.

I have also used it in cases of menorrhagia and uterine hemorrhages with satisfactory results. I have taken such cases and given ergot and mistletoe, with the object of testing the relative merits of the two remedies, and unhesitatingly pronounce in favor of the latter. In post-partum hemorrhage the results have been no less satisfactory than in labor and menorrhagia.

Viscum acts with so much more certainty and promptness than ergot, that I have been using it exclusively for several years. It acts by stimulating the uterus to natural contractions, and does not, as ergot, produce continuous or chronic contractions, so that it may be given at any stage of labor, and in primiparæ, when we feel so much risk is run in giving ergot.

I ask the profession to give it a fair trial, and feel assured that no such disappointments as we frequently have from ergot will happen. It may be given as a decoction or the fluid extract.

The fluid extract is the most convenient method of administering it. It is of uniform strength, and does not deteriorate by keeping—another decided advantage over ergot.

The dose is a teaspoonful, and may be repeated in labor every twenty minutes until the desired effect is produced. In menorrhagia every four to six hours is often enough.

In post-partum hemorrhage a firm contraction of the uterus may be induced in from twenty-five to fifty minutes.

The Quinine Flower.

(*Sabbatia Elliottii*.)

By J. DABNEY PALMER, M. D., Montecello, Fla.



PROFESSOR Maisch, of Philadelphia, in an article published in the *American Journal of Pharmacy*, classifies this plant as the *Sabbatia Elliottii*. It is an annual, making its appearance in the middle of March or first of April, and flowering from July to September, or even as late as October. The flowers are small (about the size of a dime) and white with a yellow center. The leaves are also small and

*Dr. E. S. Crosier, in a recent number of the *Louisville Medical News*, states that our American mistletoe is termed botanically *Phoradendron Flavescens*—the *Viscum Album* being the European variety.—[ED.]

linear. The root consists of numerous slender fibers, and the whole plant is not over twenty-four inches high. Its usual height is only twelve to eighteen inches.

It is a native of Florida, and grows luxuriantly in some portions of the State. In the lower part of Jefferson county it is very abundant. It may also be found in Georgia, and, perhaps, in South Carolina. The most favorable situation being an open pine forest, with moderate dry soil. I have seen it, however, growing in flat places, in which there was considerable moisture and fertility; and also in the vicinity of swamps. And in what is called the flat woods, extending from a few miles south of Monticello to the Gulf, it can be gathered in any quantity.

As a remedy for intermittent fever it has long been familiar to those living near it; and I am informed, that in many families no other remedy is employed. Its value in this disease, and in other types of malarial fever, was for many years only known to them; and, in all probability, would have remained so until now, had not the war produced such a scarcity of quinine as to force upon us the use of various substitutes. In addition to the antiperiodic property of this substitute, for which it was so much esteemed, these people had observed an analogy existing between its physiological action and that of quinine, as well as a similiarity of taste, and consequently called it the quinine flower. And in order to prove successful, they would give it, as they said, until the patient felt the quinine in his head. Nothing more than a strong tea, or extract of the whole plant was made, and given without any special directions, except that just mentioned. The uniform success attending its administration, notwithstanding this unskillful and imperfect method of preparing it, was thought evidence of its real value, and warranted further investigation with a more carefully prepared preparation. Consequently I made a saturated tincture with diluted alcohol, and gave it in teaspoonful doses every two hours until the patient was brought under its influence, or the paroxysm broken. This I used successfully in many cases of intermittent, and in a few of remittent fever.

As the plant is free from astringency, it might be given in combination with the various soluble salts of iron, thereby forming elegant and efficient tonic and antiperiodic compounds.

Guarana in Sick Headache.

By JOHN C. STEWART, A. M., M. D., YORK, Me.

WHEN a mere boy I suffered intensely from sick headache. Any one who has had it knows that "*intensely*" is no exaggeration. I applied to physicians, and bought books on headache, to no purpose. I studied medicine myself, for the purpose of trying to cure it. I failed in every attempt, until I tried guarana, in 1874. I took teaspoonful doses of the powder every fifteen minutes until I obtained relief from the attack. For two years I continued to use it as a palliative, when I found myself cured. I have not had a recurrence of sick headache for nearly two years. I have used it in my practice, and always with the result of relieving the paroxysm, and, at times, of removing the difficulty. I have used the powder, extract, fluid extract, tincture and elixir, with equal success. I consider it stimulant and tonic, and think I am borne out by experience in my conclusions. I am now using half ounce doses of the elixir every twenty minutes until relief is obtained from the attack. Between the paroxysms I use no treatment.

Damiana—Turnera Aphrodisiaca.

By I. J. M. GOSS, M. D., LL. D., MARIETTA, Ga.

DAMIANA is one of those most valuable specific remedies, introduced to the medical profession recently. Some men have tried it and reported unfavorably of it, and that is in consequence of poor preparations of the article. I procured a fluid extract from that most reliable house, viz.: Parke, Davis & Co., Detroit, Michigan, and tried it. The case in which I gave it a trial was a large man, some forty years of age, who came to me to consult me for a loss of seminal power. He stated that he had some desire for sexual congress, but that he had no power of erection, consequently no ability to perform sexual intercourse. His general health otherwise was good. I put him upon half drachm doses of damiana (the fluid extract) three times a day, and in a few days he reported himself as very much improved, and after continuing it a short time discontinued the remedy. I look upon damiana as one of the most positive tonics and stimulants that we have for the genital organs, for male and female. But, like all good remedies, it must be prepared right. A great many of our best vegetable remedies have been condemned simply because imperfect preparations were used. Many vegetable remedies contain proximate principles that are not extracted by any simple mode of preparation, consequently the virtues are not obtained in ordinary preparations. Pharmacy is a science, and must be well understood to afford good preparations.

Eucalyptus Globulus in Pleurisy.

By GEO. W. MALLORY, M. D., LOWELL, Mich.

EUCALYPTUS given in alternate doses with grindelia robusta in tuberculosis or inflammatory condition of the lungs and pleura, is very efficacious, as I have found in a recent case, which I will report:

Mr. J. T., aged forty-five, of a sanguine nervous temperament, was attacked about December 4th, 1877, with pleurisy and inflammation of the lungs. The lower lobe of the right side was the most affected; also the pleura, on same side was much affected. The inflammation of the lungs terminated in a large abscess or tubercle in lower lobe of right lung. He expectorated a pint of muco-purulent matter in the course of two hours, then the cough became easier and the expectoration became less every day, and after two weeks from the time of attack he was convalescent. The attack was so severe that he could not lie down for forty-eight hours, and his feet and hands were very much swollen. The dyspnoea was labored and difficult; urine very high colored. The bowels remained inactive as to the evacuation of their contents for ten days. I do not believe in evacuating the bowels, unless there is some organic lesion. To give a cathartic early, to evacuate, is bad policy in any case of disease of the respiratory organs.

I treated the above case on general principles: I gave the grindelia and eucalyptus in one-half drachm doses alternately every two to four hours for ten days, then give it alternately every six hours for ten days. At the end of twenty-five days all cough and expectoration had ceased. For a week all who saw this case pronounced it a hopeless one, and that neither I nor any one else could cure him.

It was the worst case of the kind I have treated for the past twenty-eight years, and I think his recovery was due to the *alternate* effect of eucalyptus

and grindelia. No blisters were applied to the affected parts in this case; I do not approve of blistering in any disease of the chest, because it only adds to the already existing irritation.

Grindelia seems to act as a non-irritant on the nerves of respiration; eucalyptus acts principally upon the secretions and carries off the deleterious matters of the system through the excretory organs, the kidneys and the skin. Its force is also spent on the mucous surfaces.

Eucalyptus Globulus in Malarial Fever.

By L. STANLEY, M. D., FINCASTLE, Ind.



REPORT a case that came under my care last fall:

J. D. came under my care suffering with great anæmia, debility and night sweats, etc. He had had various attacks of fever and chills. Had been given quinine and cinchonidia until almost deaf, and the brain and nervous system badly injured. The mineral acids had been used and the bromides to relieve the brain. He had very slight fever in the evening, yet he was very restless and delirious through the night. All the old remedies had been exhausted for good and even pushed to harm. His friends had despaired of recovery. I had just read NEW PREPARATIONS and put him on eucalyptus, a teaspoonful of the fluid extract every four hours. Under its influence he slept well, the night-sweats stopped and he made a rapid recovery.

I have used it in other cases with satisfaction. My experience proves it to be a good tonic, and it exerts a soothing anodyne influence on the nervous system. It seems to increase the efficacy of quinine to control intermittents and to obviate some of the objectionable features of it. It also acts as a diuretic.

On the Use of Sulphate of Cinchonidia in Intermittents.

By A. P. MURRAY, M. D., ALBANY, Ind.



NOTICE in reading your journal that several physicians report that in their hands the sulphate of cinchonidia has failed to have the desired effect in intermittents. I have used a great deal of it within the past year, and my success has been equal if not superior to that of former years, when I used quinine. I find the cinchonidia combined with rhubarb, capsicum and acid benzoic, the remedy in chronic intermittents of the tertian type. I will, to show what it has done in my hands, give a few cases.

Case 1st. Master B., aged twelve years, has had chills, tertian form, for three months; has had quinine, Fowler's solution and several other remedies. I prescribed,

R. *Sulphate Cinchonidia*,
Pul. Rhei,
Pul. capsicum, each twenty grains.
Acid benzoic, five grains.

Mix, make twenty powders. Sig. One every hour beginning twenty hours before chill is expected. On sixth day repeated the prescription. Patient has not had a chill since, now four months.

Case 2d. Mr. W., aged twenty-two, has had chills for nine months, tertian type; says he has taken everything without permanent relief. I ordered twenty grains of calomel, to be followed with castor oil; after the bowels were opened I prescribed

as in case No. one. Now, after a lapse of two months, there is no return of the chill.

In small children I use a prescription half as strong as the above, with the same good results.

I could give numerous other cases were it necessary, but the above will suffice to show what cinchonidia will do if properly used.

Tincture of Colocynth.

By JAMES I. TUCKER, M. D., CHICAGO, Ill.



YOU invite communications upon not only new remedies and preparations, but upon old ones put to a new use. I have written upon the tincture of colocynth in the *Med. Journal and Examiner*, of this city, and since received numerous testimonials in favor of colocynth in allaying colic of an idiopathic character, colic dependent upon foreign bodies as a matter of course being removable by means calculated to remove the obstruction. But for *idiopathic* colic, which is a neurosis, I have never found anything more efficacious than colocynth. This, I have since learned, is a common remedy with the homœopaths; so that with them colic and colocynth are as intimately associated in therapeutics, as their names are in alliteration. I should regard a medicine-case defective that did not contain colocynth in the form of tincture, for the tincture given in small doses, often repeated, has decided advantages over all other forms.

There are several old remedies which I have experimented with in a manner quite novel, and with results which, sometime in the future, I shall be glad to report to your journal.

Smilax Sarsaparilla.

By M. E. HYAMS, STATESVILLE, N. C.



IN calling the attention of the medical fraternity to this valuable article, the writer quotes some authority that will corroborate his knowledge and experience upon the subject, from Dr. Johnson King's *American Dispensatory*, page 778, which says:

There is a plant in the south, extensively known as bamboo brier, the root of which I have much used in practice, and with decidedly more successful results, than from the use of any of the sarsaparillas from the shops. He invites the attention of physicians to it as a remedy in every respect superior to the commercial article, especially in primary and secondary syphilitic diseases.

We further quote from the U. S. Dispensatory, page 809, the following, to wit:

Smilax sarsaparilla was admitted by most of the standard authorities as the true source of this drug, but it is probable none of the sarsaparilla of the shops was ever obtained from it. It is a native of the United States, and the medicine has never been, within our knowledge, collected in this country.

The writer's experience for thirty-five years, as a collector of southern indigenous plants, strengthens the above statement. That it has never been collected as a commercial article and placed upon the market, is no reason that it should not be fully tested; and why so valuable an article should have been kept secluded or in a state of oblivion, is truly remarkable. My observation is, that the smilax sarsaparilla has been used as a domestic medicine for purifying the blood in our southern states for many years, with the happiest effects, and stands pre-eminent among our physicians as a domestic remedy.

Among the Indians and our people it has been extensively used as an anti-syphilitic remedy, and is to-day the most popular indigenous root for the above purposes. It is used in the form of a decoction and taken *ad libitum*; age does not effect its peculiar virtues, and it is certainly more reliable than the imported sarsaparilla.

It has been found serviceable in rheumatism, scrofula and diseases of the skin. Allow me to relate an instance that occurred a short time since. An experienced physician of excellent standing in our country was using *menispermum Canadense* for a patient afflicted with syphilitic tumor, but found little or no benefit derived from its use. He had supposed he had been using the *smilax sarsaparilla*, until advised differently by the writer. He, thereupon, went to work, collected the proper article, gave it in decoction to his patient, who is now rapidly recovering, and with every indication of getting entirely well in a short time.

There is no doubt, if the *smilax sarsaparilla* was properly prepared into a fluid extract, that upon a fair trial its virtues would prove superior to the ordinary imported sarsaparillas of the present-day, as much of the latter is nearly or wholly inert.

If a nice preparation could be made, no doubt exists in my mind that the curative powers of this article would be found essentially useful in other diseases, upon which it has not been tried or tested.

I have thus written an unbiased communication from experience and personal observation, that has been witnessed solely by myself, and now leave the subject to others, hoping in conclusion to see it placed upon the market and fairly tried upon its merits.

Eucalyptus in Diphtheria.

By A. B. WOODWARD, M. D., Tunkhannock, Pa.



N cases of diphtheria where there are dark red and rough edges of the tongue, I mix "baptisia" with the eucalyptus,—for children from two to five years old I prescribe,

R. *Fluid extract eucalyptus, twenty drops,*
Fluid extract Baptisia, ten drops,
Aqua, one-half tumbler.

M. and give a teaspoonful every half hour. This answers the place of a gargle and also antidotes the "septic poison," which imprints the type of the disease. If the throat and roof of the mouth present a dark shiny red, I order eucalyptus alternately with twenty drops of tincture ferri chloridi, aqua two-thirds of a tumbler, sweeten with good white sugar, giving a small sip every hour. If the pulse is sharp and quick, tongue white, with injected papillæ, eucalyptus alternated with tincture aconite five to seven drops, aqua two-thirds of a tumblerful. If full and soft or full and rather hard, tincture veratrum viride five to seven drops, aqua four ounces, sweeten and give a teaspoonful every one-half or one hour.

The eucalyptus is employed as an antiseptic remedy, and the aconite and veratrum viride as the "fever remedy," which is very much favored by the use of the eucalyptus, not more than half the amount being required to produce the same amount of sudation, or diaphoresis, as is required without the eucalyptus; and the reason is, in part, because the system is relieved of the poisonous irritant, which the eucalyptus antidotes. It is preferable to quinine in fevers because quinine is only an antidote to malarial poison, whereas eucalyptus antidotes both malarial and animal poisons.

In cases of typhoid conditions quinine invariably does harm by producing more excessive dryness of

the tongue. Eucalyptus, on the contrary, moistens the tongue, and also destroys that peculiar septic odor which every practitioner at once recognizes in true typhoid conditions, if he has a trained nose. In diphtheria it also destroys the peculiar odor at once.

Myself and partner have had diphtheria and scarlet fever cases by the hundred since the middle of last April, and we have not failed to change malignant types into simple types in a very short time, and have stopped the putrid scent so often present within twelve hours. We have lost only one case (and that one was a case where early treatment was received from other parties) whose trachea was filled with diphtheritic exudations, when it came into our hands. Eucalyptus will change malignant scarlatina to a simple type, in twenty-four hours, if given and used rationally, with *belladonna*, if this is necessary to relieve urgent congestion. Of course, the strength should be governed according to age and the urgency of the symptoms, all of which the true physician can see at once. We could give sufficient cases to fill a large volume, where eucalyptus (if a good article) has positively changed *malignant conditions* to favorable conditions in a remarkably short space of time.

As a local application for ulcers and wounds, it has *no equal*, and for suspicious leucorrhœal discharges, it is one of the *best* articles; say one to two drachms in one-half pint of tepid water, for vaginal injections, injecting it slowly; and for toning up vaginæ and weakened and prolapsed uteri, there is no better remedy for vaginal injections than eucalyptus; equal parts of fluid extract eucalyptus and spice-bush leaves and bark used in the strength above mentioned.

Eucalyptus is not only an antiseptic but is also a disinfectant. It only requires to be used once to prove this in cases of sloughing ulcers, or retained placenta. The main trouble, however, is in obtaining a good article.

Had I sufficient time, I would give cases where we have used it alone in order to test its virtues, but suffice it to say that we do not see fit to be without it for a moment if we can help it; and we prefer the fluid extract made from the leaves of the eucalyptus which grows in Australia, believing it to be as much superior to the Californian tree as the long buchu leaves are superior to the short.

We also wish to bring to the notice of the profession the fluid extract of spice-bush leaves and bark for vaginal enemas, in cases of prolapsed uteri and ulcerations of the os and vagina, leucorrhœa, etc.

We will give you some of our experience in the use of "equisetum hyemale" as soon as convenient. The article grows here in abundance. It is almost a specific in congestion or clogging of the kidneys, and as such is an indispensable article.

New Preparations.

A NEW TONIC—"BOLDO."—Researches have been made by Messrs. Dujardin, Baumez, and C. L. Verne on this proposed addition to our list of medicines.

Boldo is a tree found in Chili, of a height of five or six feet, isolated on mountainous regions, with yellow blossom, and a verdant foliage. Its bark, leaves, and blossom possess marked aromatic odor, resembling a mixture of turpentine and camphor. The leaves contain largely an essential oil. It contains an alkaloid which is already called "boldine." Its properties are chiefly as a stimulant to digestion and having a marked action on the liver. Its action

was discovered rather accidentally, thus: Some sheep which were liver-diseased were confined in an inclosure which happened to have been recently repaired with boldo twigs. The animals ate the leaves and shoots, and were observed to recover speedily. Direct observations prove its action—thus, one gramme of the mixture excites appetite, increases the circulation, and produces symptoms of circulatory excitement, and acts on the urine, which gives out the peculiar odor of boldo.—*The Medical Press and Circular*.

CURARA IN EPILEPSY.—C. F. Kuntze (*Deutsche Zeitschr. f. Prakt. Med.*, 1877, No. 9), suggests the employment of subcutaneous injections of 0.5 grm. (gr. $7\frac{1}{2}$) curara in 5 grm. (℥ iv) water, with the addition of two drops of hydrochloric acid. Eight drops of this solution are injected in adults, at intervals of a week. In a number of cases in which this method of treatment was employed, a few weeks sufficed to bring about a marked amelioration in the epileptic symptoms.—*Louisville Medical News*.

PITURY.—This is a stimulant used by the natives of Australia. It is a shrub found in the desert regions of the interior of the island. It is supposed to be the *duboisia hopwoodii*, the dry leaves and stems of which are chewed by the aborigines to invigorate them when on long journeys, and to excite their courage in war.—*St. Louis Clinical Record*.

TSA-TSIN, A HUMBUG.—Nearly thirty years ago some English medical journals frequently brought reports of different physicians testifying to the valuable emmenagogue properties of a new remedy named *Key-tse-sing*, or *Tsa-tsin*, purporting to come from China, and to be the leaves and flowers of a plant belonging to the natural order Ternstroemiaceæ. After having lain in oblivion for some years, it again came into use, and is not unfrequently called for even now. As we, however, were entirely unable to trace the remedy beyond Germany, and as the supposed botanical name by which it is distinguished on the labels of the packages, namely, *Rhynchosia excavata*, could not be traced to any authority, we have for over a year been trying to solve the riddle. In this we believe to have now, at last, succeeded, for we have received from one of our correspondents in Europe, who is connected with one of the largest wholesale drug houses on the continent, the following information:

"In regard to the article Tsa-tsin, we can only say that it is a humbug, originated by a certain quack in Leipsic. Its composition may have been different in former years, but the article at present sold, and which is recommended as a remedy in epilepsy (it is also vaunted as a prompt emmenagogue), consists of a mixture of cut herbs and flowers, chiefly of the herb of *Chenopodium ambrosioides* L. and *Ch. Botrys* L., *Artemisia vulgaris* L., the flowers of *Anthemis nobilis* L. (chamomile), and perhaps also of *Anacyclus Pyrethrum* L. (pellitory), and of other plants. We know nothing about its effects."—*New Remedies*.

Paragraphs.

USTILAGO MAIDIS.—In the January number of the *American Jour. of Obstetrics*, Dr. J. T. Everett, of Sterling, Ill., details a series of interesting cases of uterine fibroids treated by him. In case VI narrated he says: "I was called in haste, July 19, 1876,

to see Mrs. M. H., aged 38, mother of one child. I found the patient suffering with intense pain, which she called colic. Upon placing the hand over the abdomen, a tumor of the size of a child's head was discovered in the right inguinal region, which, upon further examination, was found to be an interstitial fibroid.

As the colicky pains from which the patient was suffering were induced by the contractions of the uterus, and as this was just what I wanted, the indications were to reinforce and assist nature. I, therefore, applied the faradic current, and gave internally a capsule containing pulv. ergot and the syrup of *ustilago maidis*. This course was continued without interruption for seven weeks, with marked decrease in the size of the tumor; then, as the ergot disagreed with the stomach, it was left off, and the week following the *ustilago* was also discontinued, and the faradism continued for six weeks longer, when, as the tumor had nearly disappeared, all treatment was discontinued."—[ED.]

USTILAGO MAIDIS.—Dr. Estachy, in the *Bulletin General de Therapeutique*, has quite a lengthy article upon the use of the ergot of corn in the place of the ergot of rye. In his experience the *ustilago* is identical in its action to that of the rye ergot.

BERBERIS AQUIFOLIUM.—At a recent meeting of the Wayne County Medical Society (Detroit), Dr. E. S. Snow reported that in the single case in which he had employed this new skin remedy, it had acted like a charm, and he was thereby induced to make a further trial of its virtues.—[ED.]

GRINDELIA ROBUSTA.—At a recent meeting of the Wayne County Medical Society (Detroit), Dr. Lichty spoke of the remarkable success he had had with this remedy in a severe case of asthma in an old person. At the second dose of the fluid extract—one drachm was given—the patient was completely relieved.

Dr. Leonard also spoke of its efficacy in his hands. At least nine out of ten cases of asthma would be benefited by its use.

His prescriptions now, for any bronchial or lung troubles, included *grindelia robusta* in them.

Dr. Mulheron, one of the editors of the *Michigan Medical News*, also remarked favorably upon the use of this remedy in an old and confirmed case of asthma that he had seen.—[ED.]

JABORANDI.—In a clinical lecture recently delivered by Prof. Pancoast at the Pennsylvania Hospital, upon pulmonary consumption, etc., the Professor gave his usual treatment for "night sweat." "This was the 1-60 or the 1-80 of a grain of atropia, at bedtime. After two or three nights' use it was found that the atropia might be stopped. There was one objectionable feature to the use of this drug, and that was the dryness of the throat which is a common symptom, attending its administration." The Professor then goes on to say, "I have also considered whether some remedy might not be employed to check this, and for some time have been using the fluid extract of *jaborandi*. Although I am not prepared to make any authoritative statement on this point, I may say that I have, on more than one occasion, obtained good results by combining these drugs. A small quantity of the fluid extract (f. 3 ss to f. 3i), given with the atropia, will not prevent the latter from checking the sweating, while it keeps the mouth moister."—Condensed from *Med. and Surg. Reporter*.—[ED.]

FUCUS VESICULOSUS.—Kelp; Bladderwrack. Seacoast of North Carolina. (Curtis' Catalogue Indig. Plants of North Carolina.) The dietetics and therapeutics relating to obesity have gained considerable prominence in medical literature of late; and as the attention of persons suffering from obesity will be attracted by any remedy claiming a curative effect, it is well to mention *Fucus Vesiculosus* (Varec; Kelp; Bladderwrack), an old remedy brought anew to the attention of the profession.

In the second volume of Pereira's Mat. Med. will be found a good wood-cut illustration of this plant.

The constituents of this plant are *cellulose, mucilage, mannite, odorous oil*, coloring and bitter extractive matter, and various salts.

The amount of *iodides* is small, varying in the different localities where it is found, not more than 25 per cent. at any time; while the chloride of sodium, sulphuric acid, potash, soda and lime represent its solid constituents.

In 1862, Duchesne Dubois gave this drug for *Psoriasis* to an obese patient, and failing in the cure of the disease to which it was directed, he found that his patient lost flesh at the rate of $3\frac{1}{2}$ pounds in 34 days, the dose being $4\frac{1}{2}$ grains of the extract.

The peculiar charm in the bladder-wrack as a remedy, is that no severity of diet is necessary. It is not until the remedy has been used two or three weeks that the peculiar effects show themselves, the favorable symptoms being the appearance of a black pellicle on the surface of the voided urine.—*North Carolina Medical Journal*.

CORPULENCE TREATED BY SEA-WEED.—Dr. M. M. Griffith, in a pamphlet (noticed in the *New Orleans Med. and Surg. Jour.*, Nov., 1877), gives a complete resumé of all that is known on this subject. In addition to the "Banting system" (selection of foods non-fattening in their character), Dr. Griffith advocates the use of the *fucus vesiculosus* (*sea-weed, sea-wrack, common sea-ware, or bladder-wrack*), belonging to the cryptogamia algæ. It is diuretic and tonic in its action. It may be used in pills [dose, gr. x to ʒij], decoction or in fluid extract form. The testimony of Mr. Duchesne Dubois is added to that of the author as to its efficacy. Dr. Dunglison, in his *Medical Dictionary*, says its efficacy is dependent upon the iodine it contains.

Correspondence.

A correspondent in Colorado requests notes of the experience of practitioners in the treatment of lead colic.—[ED.]

In looking over the pages of **Paw Paw Seeds**. NEW PREPARATIONS for January, 1878, I see on advertising page seven, a desire expressed for more light on the therapeutic action of paw paw seeds.

I have a *small* amount of light to offer on the article.

For a number of years, I have been using a tincture of the seeds, but for no other purpose than as an emetic for children. It has given very good satisfaction for that purpose; its action is quick and easy, without any distress, and but very little sickness, and is very pleasant to the taste.

I make my tincture as follows:

*Seeds, four ounces,
Alcohol, one pint.*

Digest and filter. Give it in teaspoonful doses fifteen minutes apart.

W. C. PARAMORE, M. D.

VALPARAISO, Ind., Feb. 11, 1878.

I have a case of a rather peculiar **Black Mulberry** liar nature. A friend of mine was taken sick last winter a year ago; his disease was pronounced gall stones, and the attacks of hepatic colic were very bad. He was confined to his house most of the winter, and was treated by everything we could hear tell of. After first being treated by hydrg. chlo. mite, lep., pod., and finally by anything that would move the bowels, one day an old man met him on the street and, after some conversation about his disease, told him to get the bark of the black mulberry, boil it, make tea, drink it and be well. He got the bark, without difficulty, as the mulberry is plentiful here, and it has done him more good than anything else. Is there any preparation of the mulberry bark? Will you please state, in the next issue of your journal, the outlines of this case and ask for statements of treatment of similar cases, and whether the mulberry bark has been used by other physicians

in such cases? I have recently read statements of treatment of similar cases by the use of the fringe tree bark (*chionanthus virg.*), and it may be the black mulberry, for all I know. When everything else fails, and mulberry too, I intend putting him on a treatment of *grindelia squarrosa* and *cascara sagrada*, or *cascara* and *berberis aquifolium*.

G. W. LAKE, M. D.

QUINCY, Ill., Feb. 15, 1878.

Black mulberry (*morus nigra*) is not allied in any way botanically to the fringe tree. A fluid extract of this drug may be obtained from manufacturers.

Will our readers throw more light on this subject by answering Dr. Lake's inquiries?—[ED.]

Dr. R. L. Moore, of Spring Valley, **Tobacco**. Minn., calls attention in your October number to "decoction of tobacco as a local application for earache in children." Let me add my testimony in its favor, after using it thirty years. I make a very strong decoction and add an equal proportion of glycerine; pour three or four drops into a teaspoon, hold over lamp or stove till as warm as can be borne, pour into the ear and fill external ear with cotton wool, and the patient will usually fall asleep in half an hour. It is sometimes well to add one part in three of laudanum.

H. C. DONALDSON, M. D.

MORRISON, Ill., Feb. 5, 1878.

I have used **Xanthium Spinosum in Epilepsy**. this agent in two cases of epilepsy to all appearance with perfect success.

A young lady, thirteen years of age, was attacked with epilepsy six months previous to my call on the twenty-first day of April, 1877. Had, as I was informed, six fits before the present paroxysm. Patient was ordered to take twenty drops of fluid extract of *xanthium spinosum*, as prepared by Parke, Davis & Co., five times a day for three months, only one more paroxysm occurring. Menstruation being fully established, all further treatment was left off.

The other case was that of a married lady, thirty-five years of age, who was taken with childbed June 12th, 1877, and gave birth to two little daughters;

directly afterwards her mother told me that patient was going to have one of her fits, when, indeed, she merged into a terrible fit, lying insensible for an hour. The next day I prescribed xanthium in twenty drop doses five times a day; the paroxysms, however, did not cease entirely until after the fourth month, the patient taking the medicine five months.

I am now trying it in the third case, a very desperate one, which I will report in a short time.

C. W. GOFF, M. D.

BIRCH RUN, Mich.

I have used cascara sagrado

Cascara Sagrado. in my own case and believe in it we have a valuable remedy.

Acting as an eccoprotic, without subsequent debility, and so powerfully promoting peristaltic action of the lower bowels, as to defy a "putting off, until a more convenient season."

H. C. BARNARD, M. D.

CHARLESTON, Ill., Feb. 15, 1878.

The sample of cascara sa-

Cascara Sagrado. grado I received of you some six weeks ago I prescribed for an obstinate case of constipation, with piles. It promptly cured both and brought on menstruation, which had been suspended for two years.

GEO. LEE, M. D.

FREMONT, Ohio, February 7, 1878.

I am using now your ex-

Grindelia Squarrosa. tract of grindelia squarrosa, and it has a fine effect upon the liver as well as upon the chills.

I. J. M. GOSS, M. D.

MARIETTA, Ga., Feb. 15, 1878.

I am in receipt of two

Gentiana Quinqueflora. numbers of NEW PREPARATIONS and believe it to be the very journal we want. I have as yet tried none but gentiana quinqueflora, and so far find it entirely satisfactory as a tonic and antiperiodic; have treated several cases of chills with it alone and without any preparatory remedies, such as calomel, etc.

J. D. LOONEY, M. D.

BRINKLEY, Ark., February, 1878.

Not having responded

Eucalyptus Globulus. since receiving the sample
Grindelia Robusta. of eucalyptus globulus, and
Salicylic Acid. having tested its virtues in

an obstinate case of bilious remittent fever, I am obliged to report unfavorable in regard to it. There are without doubt tonic qualities connected with its use, but in my hands it failed to make any impression upon the periodic chills. Among all the new remedies, which you kindly favored me with, I found grindelia robusta, ustilago maidis and fluid extract jaborandi the most efficient and prompt in their action.

I cannot speak in too high praise in regard to grindelia robusta in asthma, or in any affections of the air passages, where fever is not too violent. In fact it is the best remedy I ever used in common catarrh or chronic bronchitis, and as soon as the price comes down, so that a country physician can afford to buy it, I will not be without it. My manner of using the fluid extract grindelia robusta is as follows: To two fluid ounces grindelia robusta I add four ounces syrup squills compound, and in common catarrh or a tightness across the lungs, with difficulty of breathing, I have found nothing as effectual, in every case tried.

In the same number of NEW PREPARATIONS I noticed an article upon salicylic acid. I have used this efficient remedy in bilious remittent and intermittent fevers with success, and combined with salicin in obstinate chronic and inflammatory rheumatism, it was and is the best prescription I ever used. I speak from a personal knowledge of its curative powers, as I am subject to acute attacks of the disease in cold, damp and variable weather. I took fifteen grains salicylic acid and twelve grains of salicin in four doses, and in four hours the swelling and pain in my joints subsided, and by following this prescription for two or three days, I was free from this painful affection.

The great benefit derived from the discovery and compounding new remedies during the past two years is very encouraging to those who are reaping their reward, as well as to mankind generally, and it is to be hoped that still greater additions will be made to our now large list of new remedies, to assist in battling the increasing maladies, which from year to year appear among us to destroy life and afflict mankind.

W. T. CLELAND, M. D.

KEWANNA, Ind., Feb. 15, 1878.

I have tried grindelia robusta

Grindelia Robusta. in a very old and grave case of asthma, after failing with other reliable remedies, and it is curing this case rapidly.

I have tried the fluid

Eucalyptus Globulus. extract of eucalyptus globulus in diphtheria as a gargle and internally, and I think it is a superior remedy.

I have tried the damiana in a case of

Damiana. loss of virility, and it acted promptly.

I tried the œnothera biennis

œnothera Biennis. in a case of catarrhal dyspepsia, and it acted very promptly.

I used the four ounces of

Fucus Vesiculosus. fucus vesiculosus in a case of obesity, but have not heard from it.

I used the extract of sandal wood

Sandal Wood. in two cases of gonorrhœa, and it acted very promptly in both cases. I think it more active than the old remedies.

I used the extract of kava-kava

Kava-Kava. in one case of gonorrhœa, and I think it the most positive remedy that I have ever used in that disease.

I. J. M. GOSS, M. D.

ATLANTA, Ga., Feb. 6, 1878.

I have been using for the

Grindelia Robusta. last eight months some of your new preparations with such marked success that I am encouraged to persevere. I have used the grindelia robusta in a number of cases of obstinate asthma of long standing, and in every case it has been of good advantage, far excelling all other remedies; and in one bad case I believe it has cured.

Of the yerba santa I would say,

Yerba Santa. I have had splendid success in laryngeal and bronchial affections; in fact, I look upon them as almost specifics in asthma and all throat and lung affections.

J. J. SCOTT, M. D.

WHITE ROCK, Kansas, Jan. 12, 1878.

From the valuable selection of new drugs received from you, I have found the following to be decidedly beneficial. I have made careful study and test in my college *cliniques*, and have no hesitancy in ascribing valuable alterative properties to berberis aquifolium. It has produced a marked effect upon syphilodermata.

Gentiana Quinquiflora. The gentiana quinqueflora is a complete success in all chronic intermittents.

Some obstinate intermittents, which were only temporarily arrested by quinine, have been promptly cured by fluid extract gentian quinqueflora.

Kava-Kava. Kava-Kava displays the effect of the piperacæ upon relaxed and congested mucous tissue. I have cured one case of mucous disease with gastrorrhœa, and several cases of gonorrhœa promptly relieved.

J. A. LARABEE, M. D.
LOUISVILLE, Ky., Feb. 16, 1878.

I have prescribed berberis aquifolium in several cases of scrofulous diathesis with favorable indications. The case I wrote you of, regarding the testing of the drug, I have yet under treatment, and is progressing more favorably than by any former treatment; doubtless would now be entirely cured, could a confirmed opium habit (of many years' duration) be overcome.

One case of chronic eczema infantile I cured with one prescription.

R. *Fluid extract berberis aquif., one-half ounce,*
Syrup Simplex,
Aqua pura f., each, three ounces,
Potassium iod., fifteen grains.

M. S. Teaspoonful four times a day.

Yerba Santa. I have thoroughly tested the yerba santa and grindelia robusta in bronchitis and asthma, and am convinced that they are par excellence.

Cactus Grandiflora. Cactus grandiflora is, beyond a doubt, a specific in palpitation. I will not be without it. Gave œnothëra biennis in very obstinate sick stomach, caused by chronic inflammation of the uterus. It quieted the irritated condition of the stomach, until the cause was overcome.

J. DODGE, M. D.
ALLEGHANY CITY, March 19, 1878.

* * * A respectable married lady (Mrs. A. E., between twenty-five and thirty years of age) having been for some two years on the decline with uterine and vaginal troubles, who had been treated and had the advantage of the best medical talent of this city as well as eastern (to some extent), but relieved only temporarily at times, called on me for treatment, and having prescribed for her, without anticipating anything very serious, or learning all the facts, she got but partial relief. I then made a careful examination, and learned all, as follows: Leucorrhœa of long standing, vesicular vaginitis very sensitive, painfully contracted, so that a small tube of syringe gave great pain inserted, perfectly impotent and incapacitated from enjoying the marital relations, etc. Prescribed guarana internally, and as a local application (after cleansing vagina with castile soap and warm water).

R. *Salicylic acid, twenty grains,*
Glycerine, one ounce. Mix.

After a few days patient reported improving; after

a few weeks I met her, and, in a happy mood she informed me she was well, her health being better than she had known for a long time before.

E. SPENCER, M. D.
EVANSVILLE, Ind., Feb. 18, 1878.

I have been using your **Eucalyptus Globulus.** fluid extract of eucalyptus globulus in intermittents, and find it a very good remedy, succeeding often when quinine fails.

G. H. PEEBLES, M. D.
DAVID CITY, Neb., Feb. 27, 1878.

* * * I find grindelia robusta and cactus grandiflora very superior remedies. The former surpasses anything for asthma—with me a specific so far.

W. J. GLOVER, M. D.
JEFFERSON CITY, Mo., January 8, 1878.

I am satisfied that cactus grandiflora is a valuable remedy in functional diseases of the heart, and believe that, in general, it should replace digitalis and other dangerous sedatives.

JAMES I. TUCKER, M. D.
CHICAGO, Ill., Nov. 14, 1877.

I think I have discovered in the **Jaborandi.** jaborandi a sovereign remedy, if not a specific for pseudo-membranous croup. Five to ten drops every half hour is just enough to keep a free flow of saliva and moisture on the surface, thus inducing an exudation between the membrane and trachea, preventing its formation and loosening that which is already formed.

Hope others will test and report.

Had a severe case of hydrothorax, which was cured in two weeks by

R. *Fluid extract jaborandi,*
Fluid extract eucalyptus, each two drachms,
Aqua, two ounces.

M. S. Teaspoonful every two hours.

M. L. DOOM, M. D.
MOULTON, Iowa, March 12, 1878.

I have used of the new remedies, **Yerba Santa.** yerba santa in lung affections, bronchitis with aphonia, with the best of success; it seems best adapted to cases where there is little or no inflammation.

Guarana has never failed in relieving **Guarana.** sick headache. I usually begin with small doses and increase if necessary. I prefer the fluid extract to the other preparations.

L. LEWIS TANNER, M. D.
MONTPELIER, Vt.

I have used salicin in a great many **Salicin.** cases of rheumatism, and think it equal to salicylic acid. I prefer salicin, as it does not irritate the stomach like salicylic acid, and I prescribe it in combination, as follows:

R. *Bicarb. potash, one ounce,*
Salicini, eighty grains.

M. Sig. Mix, divide into ten doses. One powder every two or three hours until relieved. This generally gives relief after a few doses have been taken. It frequently causes profuse diaphoresis.

I have used several pounds of **Dialysed Iron.** dialysed iron, and am much pleased with it. It has several advantages

over the old "liquor ferri chloridi" and other preparations of iron. It does not have any injurious effect on either stomach or bowels, though I do not think it superior in its effects to some other preparations of iron.

I have used a great deal of **Sulph. Cinchonidia.** this in my practice. I am located in the midst of malaria, and have used almost all antiperiodics known, and I find cinchonidia has several advantages over quinine—it does not cause so much cerebral disturbance, is cheaper and as efficient as quinine. More soon. D. P. SMITH, M. D.,
Res't Physician Spencer Acad'y, Choctaw Nation, I.T.

In your NEW
Pomegranate Bark in Tape-worm. PREPARAT'NS
for October '77

my attention was called to the use of the pomegranate bark for tape-worm, and I desire to add a bit of evidence that will help to establish its merits more fully (if may be) in the above named cases.

Shortly after receiving the journal, Mr. M., aged thirty-three, tall and slim, came into my office to talk with me about his case and said he had passed at one time about five feet of tape-worm. After a little conversation I became convinced that he was correct, and told him I would send for some medicine, and then give his case a trial. I did so, using the powdered extract jalap and a strong decoction of senna instead of fluid extract, as reported in the journal, and citric acid instead of lemon juice.

On the 17th of January he took the remedies as per directions in your journal, and in about three-quarters of an hour after taking the pomegranate bark decoction, the worm passed, being about twenty-five feet in length. In an hour's time patient was feeling well, ate some dinner and went about his work. Since then he has been "all right," to use his own language. R. A. HALL, M. D.

ELK FALLS, Kan., January 24, 1878.

I notice under the head of
Sulph. Cinchonidia. Substitutes for Quinine (in your January number) there is much diversity of opinion in regard to cinchonidia sulph. I have used the cinchonidia for two years past, and have been as successful in stopping the paroxysms of ague, as when I used quinine. As a tonic I prefer quinia. In remittent fever, where is nausea and vomiting, quinia is more easily retained in the stomach. W. H. GIBBINS, M. D.

STONE CHURCH, Ill., March 2d, 1878.

I have sold about twelve
Fucus Vesiculosus. pounds of fucus vesiculosus, but two of the patients have been under my observation, each one of these *gained* two pounds a week, for one six, and the other eight weeks; but I still recommend it and shall report if I see any good from it. H. LEE HATCH.
JACKSONVILLE, Ill., Jan. 29, 1878.

I read in NEW PREPARATIONS of the wonder workings of fucus vesiculosus in the reduction of obesity. I procured one pound at our drug store and gave it according to dose on bottle. It did neither good nor harm, as far as patient could tell. I next procured two pounds from head-centre, Detroit, and gave that in the large doses recommended in NEW PREPARATIONS. The patient gained four pounds each week he was taking the medicine; he stopped the medicine, gained one pound the next week, and the week after that did not gain any.

Dr. Cowan, of our place, received the same medicine from same source and gave it with like results,

only his patient gained *five* pounds. Now my patient wishes me to ask you if it could have been possible that there was any mistake in the medicine.

I have given you the facts in those two cases. We have wealthy men and women here that would pay by the hundreds of dollars, to get rid of their surplus adipose. Would be pleased to hear from you. M. N. WILHITE, M. D.

CRAWFORDSVILLE, Ind., Feb. 12, 1878.

(See remarks on Editorial page 42.—ED.)

Last fall I tested the merits of
Salicylic Acid. salicylic acid as a febrifuge. My patient was a married man about thirty-five years of age. When I first called to see him he was suffering with intermittent fever, pulse high, thirst intense, severe headache, pains in the bowels, limbs and stomach, tongue very red on the tip and edges, thick brown coat on the back part, vomiting every half hour or hour. Pain in the stomach very intense, no appetite, very restless. I applied a blister of cer. cantharidis; gave sub. nit. bismuth and morphia to relieve the vomiting. I gave him calomel and Dover's powder every other night to relieve the torpidity of the liver; ordered sulph. cinchonidia in three grain doses every four hours, or as often as the stomach would bear it. This is about the regular routine of practice in this community, but it did not answer in this case. I could not keep the vomiting checked entirely without too much sulph. morphia. The fever seemed to be uncontrollable. Accordingly I ordered the following prescription:

R. *Salicylic acid, one drachm.*

Aqua ammonia, one ounce,

Glycerine, three ounces,

Aqua pura, two ounces.

Mix. S. Tablespoonful every four hours.

I am glad to state that the vomiting ceased, the fever was entirely checked and my patient was walking about, well, in three days.

Case No. 2. Mrs. S. C., aged fifty, was taken with the most violent congestive chill I ever witnessed. I used hypodermic injections of sulph. morphia to control the nausea and vomiting, and gave her ten grains of sulph. cinchonidia, with sufficient arom. sulph. acid to dissolve it, every two hours. I continued this treatment two and one-half days, when I discharged my patient, cured, having given her half an ounce of sulph. cinchonidia, the most heroic treatment I ever indulged in.

Hoping this may be of benefit to some one, I submit it to you. J. H. ERRETT, M. D.

TRUXTON, Mo., Feb. 7, 1878.

I am now trying a good number of your new preparations on every occasion that offers itself; if they fulfill everything that the articles of your journal and the elegance of their manufacture promise, I have no doubt that you will be highly rewarded in a very short time for the boon you confer on mankind by their manufacture and introduction.

A. OSTERTAG, M. D.

SOUTH ST. LOUIS, Mo., January 28, 1878.

Grindelia robusta is as near
Grindelia Robusta. a specific for asthma in all its forms as any medicine can be. It is a valuable adjunct in treating all diseases of the respiratory organs, either functional or organic.

Yerba Santa, I think, is not so
Yerba Santa. efficacious in tuberculosis or well marked organic lesions, though I find it plays an important part in effecting a cure.

GEO. W. MALLORY, M. D.

LOWELL, Mich., 17 Feb., 1878.

NEW PREPARATIONS.

GEO. S. DAVIS

AND

C. HENRI LEONARD, A. M., M. D.,

Editors.

DETROIT, MICH.; APRIL 15TH, 1878.

GEO. S. DAVIS, Publisher.

Editorial.

Fire.

Our readers will please pardon the delay in this number. After getting everything ready for the presses, the fire which recently visited the *Free Press* office destroyed everything for us. Our subscription list was not, however, lost.

Questionable Remedies.

THE following which we clip from the editorial columns of the *St. Louis Clinical Record*, February number, would not be worthy of our notice were it not for the fact that the question under consideration is purely an ethical one; and since the editor of said *Record* has allowed his temper to blind his reasoning faculties—possibly arising from a fit of indigestion that “ingluvin” could not aid—we will once more attempt the discussion of the question.

“‘QUESTIONABLE REMEDIES.’ An advertising journal, issued by an enterprising firm of manufacturing chemists in Detroit, takes occasion to read us a lecture for copying into our columns a notice of the ‘virtues’ of ‘Ingluvin’ or ‘Digestine.’ As the article referred to contained a notice in the head-line of the source whence ‘Ingluvin’ is obtained, and as the editor of the *Record* has, for many years, been familiar with the ‘virtues’ of the pepsin derived from the barn-yard fowl, we do not see wherein the article referred to was ‘questionable’ any more than we perceive the questionableness of pepsin made from the stomach of the pig.

“Perhaps the old gentleman (or lady?) who edits the journal referred to was unable to learn the source from which ‘Ingluvin’ is derived. We trust this notice will make it plainer to his (or her) comprehension. If not, perhaps Messrs. Warner & Co. will be courteous enough to furnish the required information—and half a dozen or more chickens’ gizzards to aid the digestion of the dyspeptic individual who edits the advertising journal in question.”

In the first place, to be personal a moment, NEW PREPARATIONS is no more an advertising journal than is the *Medical Record* of St. Louis, or any other medical journal published; all journals have to depend upon two things for their financial existence; first, their advertising patronage; second, their subscription receipts. Henry C. Lea’s great *American Journal of the Medical Sciences* admits no advertisements to its pages but that of the house issuing it. Isn’t this, then, *Mr. Record*, an “advertising journal?” From the fact that NEW PREPARATIONS confines its advertising patronage to a half

dozen individuals, is that any reason why it is more of an “advertising journal” than the *Record*, which each issue editorially puffs its patrons, and even stoops to recommend to the use of the profession sundry patent-right formulæ and preparations? Certainly the course of the *Record* is not ethical; and we defy it to point to one of the patent-right-*ines* which we have ever indorsed, or to an editorial article puffing our advertisers.

Furthermore, NEW PREPARATIONS is edited and issued by the editors whose names stand at the head of the editorial columns, the astute editor of the *Record* to the contrary notwithstanding.

The same amount of ignorance that allows him to overlook the gender of the editor (he also ignores the fact that there are two editors, although the names of both are plainly printed at the head of the editorial columns) also blinds him in reference to the *morale* of our former article.

Now *Mr. Record*, we find no fault with the remedy as a remedy, for we ourselves have used the gizzard of the barn-yard fowl in cases of dyspepsia in children long before the name “ingluvin” or “digestine” was coined for copyright purposes.

The protection of a medicinal product by means of copyrighted label, or patented formula, is the main point of difference between many of these “questionable remedies” and the pharmacopœial ones; and this is just the ethical difference between the copyrighted remedy the *Record* is so fond of puffing, and the pepsine from the stomach of the pig. Any pharmacist in the United States can manufacture all the pepsine he pleases, and place it in any market he pleases; but can any one but the proprietors of “ingluvin” put any such preparation of the chicken gizzard upon the drug market?

We are sorry to be compelled to expose the ignorance of our St. Louis contemporary in so summary a manner, and to so many of the profession of our great country as NEW PREPARATIONS reaches. But as he has, seemingly, little thought upon this patent-right subject, only as he might injure, financially, the doctor who introduced glycerite of kepheline, we have thought it best to more particularly call his attention to the error of his ways.

Every time the innocent *Record* has praised its favorite “ingluvin,” “bromo-chloralum,” “diphtherine,” etc., it has simply been commending to the notice of the regular profession *irregular* and, according to the code, *condemned* articles; and while it has so loudly denounced the medical journals that were victims to the Philadelphia kepheline compound, it held itself up as a paragon of ethical morality. It is just this pharisaical doctrine of the *Record* that we now wish to expose; and as it has so plainly expressed itself on what it will have, we will say that we will take neither. We prefer the good old pharmacopœial remedies, or those whose composition is open and above suspicion, and whose manufacture can be undertaken by any druggist or pharmacist in the United States. We do not believe

in drug monopolies, allowed through the strong power of the patent-office, and promoted by such high minded custodians as the pharisaical *St. Louis Medical Record*. We presume it will next be holding up to professional view the many virtues of the patented printed pill; but of this in another article.

Questionable Novelties in Pharmacy.

WHILE we should foster and encourage all improvements in the appearance and taste of pharmaceutical preparations, when a real improvement is made without correspondingly increasing the cost, it is questionable whether it is advantageous to encourage the sale of those products whose only merit consists in their novelty of dress, or peculiarity of form.

We allude now more especially to those varieties of standard preparations, in pillular form, which have recently been invested with a patented dress of coloring-matter—with a patented shape of outline, be it biconvex, as the “compressed,” ovaliform, as the gelatine coated—or invested with a patented placard of its name upon its outer covering.

The reasons we assign for doubting the propriety of recommending these fancied improvements in pharmacy are as follows:

1st. The expense in their manufacture is increased; and this, necessarily, entails a greater expense upon the retailing pharmacist, the physician (if he dispenses his own remedies), and the patient. Of course, if any benefit was derived from the use of such goods by a sick person, it would be out of place to question the difference in price. Now, no one will admit that a colored pill is more inviting to the patient than a sugar-coated one; in fact, it is much more repulsive; as to the lettering, it is absolutely of no use, unless one is so careless and slovenly as to allow his stock to get mixed up, and so needs this aid in order to select out the proper pill when a customer calls for it; such doubtful qualifications in a dispenser should subject him to ostracism from the profession he disgraces, you will all admit. As to the patient, what does he know about it, anyway? Suppose a prescription is written for any one of the formulæ, so meaningless to the laity, what good does it to the patient to see a lot of letters, so far as he is concerned, cabalistically encircling his pill?

In the case of a physician's ordering morphine, or calomel, especially to a hysterical person, the very purpose, oftentimes, would be defeated; for in half the cases the pill would remain untouched; or, on the next visit of the doctor, his ears would be regaled with all the tortures the patient endured in the pillish purgatory ensuing upon its taking.

Then, too, on the principle of polypharmacy, the production is decidedly objectionable. The material added to the coating to color it—or to the pill mass to color it, or the ink or staining fluid forming the letter upon the pill, is simply so much extra, and, medicinally, is perfectly useless.

2d. The improvement is absolutely of no profit to any one but the holder of the patent, in whose own private interests it is freely advertised, thereby, if possible, diverting trade from equally responsible and reliable houses to the one protected by the patent laws. This strikes a death-blow to fair and honorable competition, the life to all legitimate trade. Instead of fostering a care and zeal in the procurement of pure and reliable drugs for the make up of the pillular mass, it leaves purity of ingredients, and skill in their manipulation, to become a second rate object of attainment; centering the major portion of manipulation, etc., upon the outward form of coating, contour or lettering, which is, in point of fact, of *no* moment to the one most interested in the product—the consumer. We venture to assert that were these patent-right processes free to be used by all manufacturing pharmacists, *not one of them*, that are now so freely advertised, would be in existence. There would be, absolutely, no demand for their, now so much vaunted, virtues. In medicine, as in everything else, the simpler its manipulation, the less excipient used (unless for some special purposes), the better is the pharmaceutical product.

While we have been more particularly dwelling upon the stained and printed pill, still the “compressed,” “gelatine-coated,” “gluten coated,” “egg shaped,” etc., are open to many of the above narrated objections. The process of manufacture is more costly, the solubility of the coating is less active than a coating of sugar, although they are advertised as the only soluble coated pills in the market. This is certainly quite a blow at the pharmacy of the by-gone years when it was clearly demonstrated by experiment, as well as in active practice, that the sugar-coated pill was easily soluble.

The result of all these innovations in pill coating has been to put upon the market a more expensive pill than the sugar-coated one, and, with the single exception of the quinine pills, their prices have been above the sugar-coated article. The secret of this low-priced quinine pill, as sent out from one house manufacturing the gelatine-coated pill, has recently been exposed by the manufacturers themselves, who issued a circular saying that the unbleached (less expensive and less pure) quinine was used in their manufacture; that hereafter the white, or bleached, quinine would be used. Now this is just a sample of the evils that a protected process of manufacture allows; were competition allowed, from necessity of the demands of trade, the manufacturers of those unbleached quinine pills could never have disposed of their stock as a *stock competing* with the ordinary bleached quinine pill. The patent allows the holders of it to offer imperfectly prepared pharmaceutical products for the ones of standard purity. The demand having been created for a certain coated, or shaped, or marked article, of course this designated article is to be dispensed, whether

of standard strength and purity or not; and hence honest competition in pharmaceutical manufacture is out of the question; all we have then to rely on is the reputation of the manufacturer, which should be, like Cæsar's wife, above suspicion, but, alas—

These, then, are a few of the reasons why we decry *all* of these "patented" preparations, articles of truly "questionable" reputation, the *St. Louis Clinical Record* to the contrary notwithstanding.

Fucus Vesiculosus.



REFERRING our readers to the letter of Dr. Wilhite in the Correspondence Department, page 39, in answer to which we would say:

Firstly, that it is not the policy of NEW PREPARATIONS to puff, editorially, any *new* remedy into notoriety. Every remedy must stand, or fall, upon its own individual merit. In our editorial columns we shall give, as a summary, the general favor with which a new remedy is received, basing the opinion upon the testimony of the majority. For this testimony we shall depend *entirely* upon the reports of cases in which the remedy has been tried by different practitioners. Any good or deserving remedy will bear this test; while worthless ones will soon fall, thereby, into their merited disrepute.

Secondly, it is not our province to condemn a remedy at sight, no matter what our individual opinion may be at the time. Our motto, *remedium non condemnatum est donec id expertum sit*, would not allow us to do this. Oftentimes a most valued remedy is neglected when first proposed; but when its merits become really known to the profession it is apt to be overestimated in therapeutical repute. We believe in the advice given by Helios to his son Phaethon when assuming control of the fiery horses of the sun, *medio tutissimus ibis*, as being the safer, and the only legitimate course for a journal, such as NEW PREPARATIONS, which is devoted to the interests of the whole profession. If we place the *whole* testimony before you, *pro* and *con*, then you yourselves become the judges; this is what we aim to do. And if, in so doing, we are able to introduce a *few*, only, of really valuable remedies, as some of our introduced new-comers have proven themselves to be, then we shall be abundantly satisfied.

Thirdly, coming more directly to the answer of our friend's questions, we would say that in all probability the preparations were all reliable. There is much testimony of fucus vesiculosus being a positive fat reducer; then, too, there is some testimony, decidedly in the minority, however, that goes to show that fucus is really a fat producer. (*Vide* NEW PREPARATIONS, page 23, July, 1877.) Here are two extremes to be harmonized; how is it to be done? It is our opinion (we do not assert it to be a fact, mind) that the proper cases are not selected in these cases of reported failures. From our study of the drug, we do not believe fucus to be

a reducer of the adipose tissue of *healthy* subjects. It is mostly on those cold, torpid individuals with a cold, clammy skin, loose and flabby rolls of fat, pendulous belly, etc., that fucus will display its powers to the best advantage. In this class of cases everything about them is apathetic; fat, to them, is a morbid condition, a result of vitiated function. In this class of cases the remedy acts beneficially by overcoming this torpid and morbid tendency, thus reducing the size, by toning up the vascular and sympathetic system. This, we say, is our belief of what the action of the remedy is. Possibly it also acts upon the starchy matters of the food in some manner so as to prevent their easy change into fat, when introduced into the human economy.

Of course, then, if a person is perfectly healthy, the flesh solid and firm, the fat not in rolls or flabby, the *primæ viæ* in good order, the action of fucus, if it be possessed of this peculiar tonic principle we have attributed to it, would necessarily go to building up the tissues of the body, rather than to the destruction of them. Still, in spite of this, we had a young man, apparently of excellent health, flesh firm and muscles hard, grow thin on the use of the remedy. He was, however, exceedingly large, weighing over three hundred pounds, the bony framework of his body being quite short.

Another gentleman of our acquaintance, a doctor, whose weight is about three hundred pounds, has been taking the remedy—he belongs to our class of healthy, active, large men—with the result of overcoming a chronic constipation, or lethargy of the liver and bowels, but with no effect on the diminution of his weight. He says, however, that he feels lighter in spirits anyway, if not in bodily flesh. He has given the remedy in other cases of chronic constipation, or intestinal lethargy, and with the same favorable results. In this respect he thinks the remedy a valuable one.

This, in fine, is the sum of the testimony upon the drug, as reported to us. It is altogether too new yet to allow one to define its action very minutely, or to assign the cases that it will benefit; it is yet in the school of empiricism. Still, in the class of torpid, unhealthy fat producers, as above described, we believe it will be of benefit.

Cascara Sagrado.



THIS is one of our newest comers, yet it is fast winning its way to the confidence of the profession as an excellent remedy in atonic constipation. Its action is a peculiar one, not being cholagogue in its nature, but rather a stimulator to the unstriated muscular fiber of the intestines, through its action upon the sympathetic nerve, thus increasing the vermicular movements of the intestines. In this it resembles, somewhat, nux vomica or strychnia. Its action, however, is somewhat different from this powerful drug, in the fact that the stools are softer.

Then, too, its taste is not unpleasant, whereas the *strychnos nux vomica* is intensely bitter. It also is less objectionable, from the fact it is not poisonous, or no more so than our milder series of drugs, thus rendering it safer to be prescribed in these long standing or chronic cases.

A distinguished college professor, whose name would be familiar to most of our readers, were we to mention it, tells us that in his own case it acts the nicest of anything he ever tried. Fifteen or twenty drops three times a day is all that is wanted, and it is devoid of *all* unpleasant sensation in its action. He is waiting until he has tried it upon others before he publishes a report of its action over his own name.

From his report of its good qualities, and from the reports of many others, we think *cascara* will take equal rank with *grindelia robusta* in the physicians' armamentarium.

A Nucleus in the Red Blood-Corpuscle.

THIS is rather a startling assertion to make, for it never has been supposed to have any. Quite recently a German micro-physiologist has demonstrated them in the red corpuscles, and, following in his footsteps has been our friend, Prof. Stowell, who has charge of the Physiological Laboratory at the State University at Ann Arbor.

Dr. Stowell, has demonstrated the presence of the nucleus to his class on several different occasions, and also to several members of the medical faculty. The doctor has been the first in America to make this demonstration. The manner in which this is done will be found in another department, where a communication from the doctor is published, in response to a request from us to favor our readers, who are interested in microscopy, with the manipulation necessary to bring the nucleus out.

Failure or Success.

IF a drug is known to have certain attributes, failure or success from its use depends entirely upon its purity, its proper manufacture and non-deterioration. Another factor to be taken into consideration, and an important one, too, as regards our newest remedies, is that you get the true drug in question. Such an assertion as this last may seem uncalled for; yet it is by no means an unheard of case that spurious articles are substituted for the drug designated, either through ignorance or willful culpability, on the part of the shipper of the original packages. Notably so is this case with *grindelia robusta*, *fucus vesiculosus*, *cascara sagrada*, *damiana*, etc., of which there are several very closely allied members of the same species; and unless great care is taken in gathering, one can be mistaken for the other. In several instances we have known this mistake to occur, and then the genuine remedy has received the brand of worthlessness, through no fault of its own. If any of our readers have experimented with remedies which have had good recommendation for their curative properties, and have found no satisfactory results ensuing, this may furnish a key to the problem. While we do not wish to criminate any manufacturing houses—for we do not think the fault is primarily their own—yet we wish to call particular attention to the point, so that they may use greater caution in the procurement of the genuine article. This has been prominently brought to our notice recently by several physicians who have found widely different results ensuing from the use of the preparations of the same (supposed so, at least) plant from different manufacturing houses. In certain cases the result would be *nil*; while in others, where a different manufacturer's product had been used, the result had been all that could have been desired.



Book Reviews.

THE ANNUAL MEDICAL DIRECTORY OF THE REGULAR PHYSICIANS OF THE STATE OF ILLINOIS, FOR THE YEAR 1878. *F. A. Emmons*, M. D., editor and publisher.

Besides the regular physicians this directory includes the names and addresses of all the "irregular" ones who have complied with the registration act of the State. The other miscellaneous matter in the book makes it of value to the Illinois physician, especially, as it contains a list of all the medical societies and times of their meetings, etc.

EARLY MEDICAL CHICAGO; by *James Nevins Hyde*, A. M., M. D. Illustrated. Chicago, D. B. Cooke & Co.

This is an octavo, paper bound pamphlet of 47 pages, replete with interest to the Chicagoan, or to any one specially interested in the "rise" of the profession of the northwest.

RUDINGER ATLAS OF THE OSSEOUS ANATOMY OF THE HUMAN EAR. By *N. Rudinger*, M. D., University Professor in the Anatomical Institute of Munich, etc. Translated and edited, with Notes and an additional plate, by *Clarence J. Blake*, M. D., Aural Surgeon to the Mass. Charitable Eye and Ear Infirmary, Lecturer on Otology in Harvard Medical School. With nine Photographic Plates and twenty-three pages of letter press. 1 vol. folio, cloth, gilt. Price, \$3.50. Boston, A. Williams & Co.

To a student of otology this is a valuable work. The photographs are very excellent, in fact, we do not know we have seen photographs of anatomical specimens that have equaled them. They were made by Albert, of Munich, and Metcalf and Well-ton, of Boston. The osteological ear is seen in all its proportions, and as plainly portrayed as if you had the bony specimens before you; and in those cases where the specimen has been magnified, even more plainly. The letter press, by the aid of figures upon the photographic prints, renders concise, yet complete description of each important portion.

HAND-BOOK OF THE PRACTICE OF MEDICINE. By *M. Charteris*, M. D., Prof. Practice of Medicine, Anderson College, Glasgow. Illustrated with numerous engravings. Large 16°, pp. 336, cloth, \$2.00. Philadelphia, 1878, Lindsay & Blakiston. Detroit, E. B. Smith & Co.

This is another of the "Student's Guide Series," and a handy volume for the busy practitioner as well as the student. It shows, in a brief manner, the salient points of diagnosis, and the treatment. In this latter we miss many of the drugs with which American physicians have become familiar the past few years in treating those diseases that are common in our changeable country. Yet, if on any practitioner's table, it will be sure to receive a good deal of thumbing.

THE VEST-POCKET GRAY, or Anatomist's Vade-Mecum; compiled specially for students, by *C. H. Leonard*, M. A., M. D., seventh thousand. London, 1878, Bailliere, Tindall & Cox, 20 King William street, Strand.

This is the English edition of our little work, *The Vest-Pocket Anatomist* (see second cover page), and is issued uniformly in matter, size and binding with the American edition, with which most of our readers are familiar. *The London Doctor* says of it:

"By dint of a small though clear type, and the exclusion of all unnecessary words, a marvelous amount of information has been condensed into a

remarkably small space. The work is one which will be found of the greatest value as a pocket companion."

THE ELEMENTS OF THERAPEUTICS; a clinical guide to the action of medicines. By *Dr. C. Binz*, Professor of Pharmacology in the University of Bonn. Translated from the fifth German edition, and edited, with additions, in conformity with the British and American Pharmacopœias, by *Dr. Edward I. Sparks*, M. A., M. B., Oxon. Large 24°, pp. 345, cloth, \$2.00. New York, Wm. Wood & Co., 1878.

The classic nature of this work is sufficiently guaranteed from the fact that it is written by so eminent a man as Professor Binz, and also that it has passed through five editions in Germany. The annotations of Dr. Sparks have made the book equally valuable to the English or American physician or pharmacist, as in these are supplied those preparations omitted from the German lists.

The matter is classified admirably, thus making the work handy for reference; for you not only find similarly acting remedies grouped together, but also all the different preparations of each drug, the dose of each being given. Besides this there is a brief description of the action of the preparations. Where the chemical equivalents are known, these are given. From the low price of the work and the superiority of its matter it should find its way to every pharmacist's table. To the physician it is handier than the dispensatory, and hence of equal worth to him.

PHARMACEUTICAL LEXICON; A Dictionary of Pharmaceutical Science, containing a concise explanation of the various subjects and terms of Pharmacy, with appropriate selections from the Collateral Sciences. Designed as a guide for the pharmacist, druggist and physician. By *H. V. Sweringen*, Member of the American Pharmaceutical Association, etc., 8°, cloth, pp. 576, \$3.00. Philadelphia, Lindsay & Blakiston.

To the pharmacist and druggist this will prove a more acceptable work than the standard Dictionary of Dunglison, as it is handier for hurried reference, having none of the multitudinous foreign phrases, words, and names of diseases, etc., in the lexicon proper. Besides, the definitions of the pharmaceutical terms and products are given more at length than in Dunglison. A supplementary chapter for the definition of diseases, with their synonyms, has been added, with a complete list of abbreviations, also many pages of select prescriptions, a posological table, poisons and their antidotes, table of pharmaceutical equivalents, dietary for invalids, weights and measures, an exposition of the atomic theory in chemistry, etc. We have no hesitancy in recommending the work as being of great value to every one engaged in practical pharmacy, or in the study of the same.

PRACTICAL GYNÆCOLOGY; a Hand-Book of the Diseases of Women. By *Heywood Smith*, M. A., M. D., Oxon. With fifteen illustrations. Large 16°, pp. 205, cloth, \$2.00. Philadelphia, 1878, Lindsay & Blakiston. Detroit, E. B. Smith & Co.

This is one of the "Student's Guide Series," now being issued by Lindsay & Blakiston. Lately there has been quite a desire, on the part of the profession, for small, *practical* works; and our publishers have seen fit to gratify this desire by the issue of condensed hand-books upon the different departments of our science. As a concise exponent of modern gynæcology we welcome this valuable little book. In his chapter on the means of diagnosis, the author has been quite minute in his description. In his signs, diagnosis and treatment of specific complaints, he is terse, clear, almost epigrammatic. To the busy

practitioner it will be a relief from the necessary tediousness of a large text-book.

MALARIA AND STRUMA, their Relation to the Etiology of Skin Diseases. Read before the Am. Derm. Ass'n, by *L. P. Yandell, Jr., M. D.*, Prof. of Clin. Med. and Therap., University of Louisville.

In this reprint the Professor desires to call the attention of the profession to the fact that in his practice "malaria is the chief source of acute skin disease; scrofula is the chief source of chronic skin disease, and that the most inveterate cases of skin disease are often due to the co-existence of both." This is certainly a novel assertion. What the Professor would like to know is: whether other physicians have noticed the same. Have you?

METEOROLOGY IN THE SERVICE OF MEDICINE.—Translated from the German of Prof. *J. Schreiber*, of Vienna, by *W. H. Giddings, M. D.*, Aiken, S. C.

This is a valuable reprint from the *Richmond and Louisville Medical Journal*, especially to one interested in the subject. It seems the Germans have thought it of enough importance to establish a chair of "climatology," and, if our medical colleges had a lectureship upon it, it would be of lasting benefit to the graduates therefrom.

THE TREATMENT OF FRACTURE OF THE FEMUR, by *Edward Borck, M. D.* Reprint from *St. Louis Med. and Surg. Journal*. Illustrated.

The doctor believes in direct extension from the thigh, the leg resting over a pyramid, or "double inclined" pillow.

TRANSACTIONS OF THE 32D ANNUAL MEETING OF THE OHIO STATE MEDICAL SOCIETY, held at Put-in-Bay, June 12-14, 1877. Large 16°, pp. 200.

The papers preserved therein are, "Annual address" by the President, *W. J. Scott*; Antipyretic powers of sulphate of quinine, *T. W. Gordon*; Obituaries, *B. B. Leonard*; Milk sickness, *S. S. Gray*; Manipulations in the reduction of dislocations, *S. F. Forbes*; Paracentesis of the cornea, *S. C. Ayres*; Surgical treatment of perityphilitic abscess, *J. H. Pooley*; Prevention of spread of syphilis, *C. S. Muscroft*; Chloral hydrate in puerperal convulsions, *Jonathan Morris*.

BATHS AND THEIR USE IN THE TREATMENT OF DISEASES OF THE SKIN—a valedictory address to the class on diseases of the skin at the Philadelphia School of Anatomy and Surgery. By *John V. Shoemaker, A. M., M. D.*

Published by the class.

REVIEW OF THE RECENT THEORIES OF BRAIN AND NERVE ACTION, AND THE USE OF ELECTRICITY IN MEDICINE AND SURGERY, by *John F. Caldwell, M. D.*, Baltimore.

From the author.

WHAT AM I? A valedictory address to the graduates of the 42d session of the Medical Department of the University of Louisville, by *J. M. Bodine, M. D.*, Prof. of Anatomy and Operative Surgery of the Eye, Dean of the Faculty.

This is an excellent essay, and well worthy the "request of publication" accorded it by the class. Would that we had more college professors capable of giving their students as sound, moral and christian doctrine.

MICROPHOTOGRAPH OF THE SARCOLEMMMA OF MUSCLE. Demonstrated by *Chas. H. Stowell, M. D.*, of the Physiological Laboratory of Michigan University.

The professor has succeeded admirably in showing the covering of the muscular fiber, for in the specimen the sarcolemma is shown clearly for a space of two inches, as photographed.

ON THE SOURCE OF MUSCULAR POWER. Arguments and conclusions drawn from observations upon the human subject under conditions of rest and muscular exercise. By *Austin Flint, Jr., M. D.*, Professor of Physiology and Physiological Anatomy, Bellevue Hospital Medical College, etc. New York, D. Appleton & Co., 1878. Detroit, E. B. Smith & Co. Large 24°, cloth, pp. 103; price, \$1.00.

The first part of this little work, so interesting to the physiologist, is devoted to the nutrition and developments of the muscular system, and the relation of the same to the elimination of nitrogen. Then follows a *resume* of the experiments of Liebig, Lehmann, Fick, Wislicenus, Parkes, Pavy, and of the author himself. The results of these experiments led the author to the conclusion that the direct source of muscular power lies in the muscle itself, and that exercise destroys a portion of muscle which amount is measured by the nitrogen excreted; that, indirectly, nitrogenized food is a source of the same power in that it repairs waste and develops a capacity for work.

A PRACTICAL TREATISE ON MATERIA MEDICA AND THERAPEUTICS. By *Roberts Bartholow, M. A., M. D.*, Prof. Theory and Practice of Medicine in the Medical College of Ohio, etc. New and enlarged edition. New York, D. Appleton & Co., 1878; Detroit, E. B. Smith & Co., 8°, pp. 565; cloth, \$5.00.

This work belongs to the new school of physiological medicine that now is fast gaining converts everywhere. The Germans have, for some time, been paying special attention to the physiological action of remedies, but the Americans were not long in equaling them in experimental research. The English seem to have been somewhat backward in this, though Farquharson, whose "Guide" we reviewed in our last number, has done excellent service in grouping together the physiological action of remedies for the use of their students. First among American experimenters, in this field, stands Prof. Bartholow; in fact, his whole life labor has been the "proving" the action of remedies, and his work now before us is a history, epitomized to be sure, of this work. It is probably a more original work than Prof. Wood's, though, in saying this, we mean no disparagement to the work of the great exponent of physiological medicine at Philadelphia. His (Wood's) work is a larger one, and embraces extended opinions of other experimentalists than himself, leading sometimes to almost contradictory views. In Bartholow's work we have that which the American student likes best—the positive expression of the author's opinion upon the results reached by others, as well as upon those from original observation. Sometimes in this expression Prof. Bartholow has seemed to be dogmatic; in this we freely pardon him, for he has a right to be, the right proven by personal physiological research.

The arrangement of matter is also an original one of the Professor's, and an excellent one it is, too, both in his "groupings" of remedies, and the text upon each individual of each group. For instance, take belladonna; we have first the common name, then preparations, then follows its composition, then a sub-head of atropia, following with the general headings, antagonists and incompatibles, physiological actions, therapy, hypodermic use, external use, then authorities consulted—the whole occupying eleven pages. All the remedies noticed receive this same thoroughness of description plus another head, (generally) which, from the fact that belladonna stands rather alone, was here omitted, that of "synergists," or remedies calculated to increase, or favor the drug action. The indices are thoroughly

prepared, a leading item in the worth of a book now-a-days.

Any practitioner armed with the works of Bartholow and Wood, need have no fear of falling back into the realms of empiricism again, as they answer the "why" of a drug-action in most cases, completely. Some remedies, it is true, are yet upon the trial list; but we look forward to a not far distant day when the mysteries of their action will be no more a theme for theory and speculation.

Clippings.

THE EUCALYPTUS.—*The Chemist and Druggist* says that Garibaldi acted wisely when he advocated the introduction of the eucalyptus to combat the malaria of the Campagna; every fresh piece of evidence relating to this tree confirms those expectations which have been formed respecting its beneficial influence. Very valuable information is contained in a report from Algiers, forwarded by Consul-General Playfair. The Consul gives a remarkable instance of the action of the eucalyptus in removing miasmatic influence, and thus improving the sanitary condition of an unhealthy district.

EUCALYPTUS IN MEMBRANOUS CROUP.—Dr. Walcher claims to have had great success in the treatment of membranous croup, both in its primary form and in the form which he regards as secondary to diphtheria of the pharynx. He employs the alcoholic tincture of eucalyptus globulus. Prof. Gubler and Dr. Gimbert, of Cannes, have shown that eucalyptol, the active principle of the eucalyptus, has a special action on chronic catarrh, with muco-purulent secretion, especially when located in the lungs, and that the resinous principle is chiefly eliminated through these organs. Dr. Walcher employed it with benefit in doses of from $2\frac{1}{2}$ to 5 drachms per diem, in cases of chronic bronchitis in old people, and in a case of pulmonary gangrene that recovered. He then tried it in several cases of croup, and it succeeded beyond his expectations; in one case the cast of the entire trachea and of the first and second bronchial bifurcations was coughed up, and the patient, a child five years of age, recovered. He has now discarded local applications, and orders an ounce of the tincture of eucalyptus with three ounces of syrup, a teaspoonful of the mixture being given every hour. The children take it readily, and if given slowly, any diseased part in the pharynx will be sufficiently impregnated with the medicament. A mild emetic of ipecac is given occasionally, if the patient be strong enough to bear it. Cold drinks are given to relieve thirst, and cold applications are made to the head if there is much congestion. The child's strength is to be kept up by proper nourishment; the alcohol contained in the above mixture is serviceable in this connection. Dr. Walcher has given five drachms and more of the tincture of eucalyptus per diem to a child five years of age, and has never known any bad symptoms to be produced by it. Dr. Siegen thinks that it is indicated in all febrile affections of the respiratory organs, and especially in whooping-cough.—*Gazette Medicale de Strasbourg*, Feb. 1, 1877.

THE BEST LOCAL ANÆSTHETIC for dental operations is said to be the extract of eucalyptus. Apply one drop on cotton to the sensitive dentine just before excavating.—*Boston Med. and Surg. Jour.*

BERBERIS AQUIFOLIUM IN PSORIASIS DIFFUSA.—In October last a Mr. Hall, native

of London, England, aged about thirty, and body well nourished, presented himself to me with typical psoriasis diffusa involving the entire integument excepting that of parts of the face, hands and feet. It was his second attack and had then troubled him three or four months, growing gradually worse in that time.

During his first attack some few years ago, being unsuccessful with any treatment in Canada, where he then lived, he went to London, England; and under the treatment of Balmanno Squire, surgeon to the British hospital for diseases of the skin, which he says consisted of baths and ointments and internal treatment, the composition of which he does not very well remember, he pretty soon got well, and so remained till the present recurrence.

After calling on me in October last, and pending his efforts to get into some hospital where he could avail himself of, what I supposed to be necessary, baths and treatment, he met with Mr. Higgins of this city, and was induced by him to try berberis aquifolium, which he did in teaspoonful doses of the tincture four times a day.

Improving remarkably in a short time he and Mr. Higgins called at my office and wished me, if I felt any interest in it, to superintend the treatment and watch the progress.

Struck with so much change without any external macerations or anointings, I was glad to watch it still further.

Soon after commencing the treatment he frequently felt a warm tingling sensation in the skin; and while exfoliation of scales went on, the production of them gradually ceased. The psoriatic patches left the trunk first, the head next, and next the arms. There are a few scales yet in front of the knees; but excepting those he is entirely well. The red discoloration which remained for some time on the trunk has lately entirely disappeared.

I have allowed myself to report the case, not from any special interest that the affection possessed, but from its disappearance during the administration of this medicine. I exercised particular care on every hand to ascertain if any other medication was had, and believe it to be the only remedy used. The patient has also told me, from time to time, that he made no change in diet or any of his habits of life. He says the medicine may have increased the action of the bowels somewhat, but not very perceptibly. In conjecturing as to its *modus operandi* I have thought sometimes that it may act somewhat upon the bowels and other emunctories, and from its bitter principle, as a tonic; and in that way correct defective elimination and malassimilation upon which this affection with many others may probably enough depend.—*Dr. T. N. Reynolds, in the Michigan Medical News.*

JABORANDI IN THE ALBUMINURIA OF PREGNANCY.—Dr. Langlet, of Rheims, in the *Union Medicale et Scientifique de Nord-Est*, reports the case of a woman in the third month of pregnancy who for six weeks had suffered from œdema of the legs, great oppression, cephalalgia, vomitings, etc. The urine was very scanty and loaded with albumen, and was uninfluenced by the usual diuretics. From the first day after the administration of jaborandi there were salivation, very little perspiration, but, as a counterbalance, an increase in the quantity of urine voided, which continued for some subsequent days. The patient took jaborandi for sixteen days, and during that time the œdema was re-absorbed, the albumen decreased, the general symptoms improved, and there was eventually a favorable delivery, with a healthy child,

VIBURNUM PRUNIFOLIUM THE REMEDY FOR THE TENDENCY TO ABORTION OR MISCARRIAGE.—It requires a long time to introduce a new remedy, or re-introduce an old one. Physicians have prejudices in favor of old methods, or prejudices against new ones. These remedies are not at hand when wanted, or are not thought of when the emergency comes. So I was not surprised to hear from an old and active practitioner the other day, that he had not yet used viburnum, though he complained of a want of success in treating these cases.

Now, I would hardly know what to do in a case of threatened miscarriage if viburnum was taken from me; and with it I feel confident of arresting the progress of the trouble, if there is a possibility of its being arrested. I can recall five cases within the year in which it has done its work so effectually that the pregnancy went on until full term. Three weeks since I was called to a case showing symptoms of miscarriage at three and a half months. The lady was awakened in the night by a sense of uneasiness in the pelvis, and a flow of blood. This took the form of uterine pain as the flow increased. I was sent for, made an examination, and found evidences of threatened miscarriage. To a half glass of water I added twenty drops of tinct. viburnum, and gave a teaspoonful every half hour. The trouble had all stopped by morning, and in the afternoon the lady was sitting up.

Of course, if there was evidence of determination of blood, or an inflammatory or rheumatic condition, we would use aconite and macrotys, as a part of the treatment which the viburnum might supplement.—*Eclectic Medical Journal*.

GRINDELIA ROBUSTA IN COUGHS.—Your selection from an article by Dr. Bartholow on the use of grindelia robusta leads me to send you the following item:

For something over a year now my usual cough mixture in cases of bronchitis, or even in certain stages of pneumonia, is the following:

℞ *Ext. yerba santa fl.*, ʒj.
Liq. potassæ, ʒj.
Ext. grindeliæ robustæ fl.
Tr. opii. camph.
Syr. scillæ, vel
Syr. ipecacuanhæ, aa ʒj.

Mix. S.—Teaspoonful every three hours.

I think this formula a great improvement on the usual one of ipecac, senega and squills, unless a depressant effect is needed, as in the first stages of pneumonia. In the hacking cough of phthisis, and in the cough from enlarged heart the grindelia robusta is an excellent adjunct; and in asthmatic coughs and other difficulties I have found the drug to be almost *ne plus ultra*. This is pretty strong language; but a large experience in the use of it leads me to adopt the phrase.

The yerba santa, an excellent bronchial remedy, from its richness of balsamic principles, is easily precipitated when water (as syrup) is added as an excipient, and for some time bothered me a good deal in making an eligible prescription of it. I found on experiment, however, that a small amount of liquor potassæ overcame tendency to precipitation, and this accounts for it in the above prescription. Besides this, it is not objectionable in itself; as an alkali it tends "to cut" viscid mucoid discharges.—*Dr. C. Henri Leonard in the Michigan Medical News*.

KAVA-KAVA IN GONORRHŒA.—Recently I procured the fluid extract of the kava kava, or piper

methysticum, from Parke, Davis & Co., and have tried it in two cases. In the first case I thought it did well, and in the other case it seems to be doing well, as the case is getting well as fast as could be expected.

The copaiba, if it could be procured pure and triturated, would prove curative in the non-inflammatory stage; but given, as it generally is, in the first stage, in large doses, will often ruin the digestive powers; and so of cubèbs also.

From the limited trials I have made of the Piper methysticum, I think it will prove a valuable remedy in the secondary stage. After using all the reputed remedies during a practice of thirty-three years, I believe that aconite, cannabis and gelseminum are the remedies for the first or inflammatory stage; then a wash of the permanganate of potassa for the other stages until it goes into a gleet; then alum comes in appropriately to finish up the cure.—*Dr. I. J. M. GOSS, in the American Medical Journal*.

CARBAZOTATE OF AMMONIA.—Having noticed an article in the April number of the *Journal*, inviting reports on carbazotate of ammonia, and having used it in my practice since the spring of 1874. My attention was first called to it through the *Med. Times*, and I at once procured a sample, and the first case of trial was as follows: James T., aged 14, nervous, bilious temperament, has had ague all winter, quartan type, tried quinine and various patent medicines, but with no benefit. Mother complained that they could get no medicine to do any good, and would like to try me, but were poor financially, and did not know when they could pay me. I told her I would cure the boy free of charge. (Being anxious to try the new anti-periodic.)

I divided gr. iv into twelve doses, adding a little hydrastis, then ordered one to be taken three times a day, before meals. The boy never had another chill that year. This result encouraged me to continue it, and I have regularly used it since, single and in combination with other remedies.

I prefer it to quinine where sedatives are not contra-indicated, especially during fevers, where the anti-periodic effect is desired and sedatives are indicated. It agrees with the system better than quinia, and never causes any cerebral symptoms. Have used it in the various grades of fevers, viz., typhoid, remittent, intermittent, and pneumonia, with good results. It seems to be slightly sedative, and therefore is contra-indicated where the pulse is weak, and whenever stimulants are indicated; in acid conditions of the stomach, it does but little good, until the acid is neutralized by alkalies. I generally give it in one-third grain doses (increasing or decreasing according to age, temperament, etc.) I have given it in one-half grain doses, and never had any bad results; I generally combine it with tonics whenever indicated. It is best administered in wafers or granules, but can be easily taken in a little jelly or fruit. Some of my patients preferring their medicine in fluid form, I make a solution and add glycerine, which is taken without trouble.

Brother practitioners, try it, and, observing the proper indications, you will find a reliable and cheap antiperiodic, which you will not be willing to practice without.—*DR. Y. S. TROYER, in Eclectic Medical Journal*.

FUCUS VESICULOSUS AND ITS USE IN THE TREATMENT OF OBESITY.—Drs. Duchesne-Duparc and Godefroy recommend the use of an extract of the *fucus vesiculosus*, or bladder wrack,

one of the most common sea-weeds found on the coasts of Europe and America, for the purpose of reducing obesity. Dr. Godefroy gives his personal experience of the effects of this drug. He took $4\frac{1}{2}$ grains of extract thrice daily, at the commencement of a meal, with the effect of reducing his weight nearly three and one-half pounds within thirty-four days. M. Dannecy gives the method of preparing the extract in the *Journal de Pharmacie*, November, 1862, p. 434. Of this extract $3\frac{3}{4}$ grains may, at the outset, be taken thrice daily, and the dose gradually increased to about three times that amount. Caution is necessary not to confound the *fucus vesiculosus* with the *f. nodosus* and the *f. serratus*. It is believed that the mistaken use of these latter has given rise to disappointment in the treatment of obesity.—*Med. Press and Circular*, Jan. 9, 1878.

BOTANICAL DESCRIPTION OF FUCUS VESICULOSUS.—The "United States Dispensatory" gives the following description:

Fucus Vesiculosus—*Sea-Weed, bladder-wrack*. This was an officinal in the Dublin Pharmacopœia, 1850. It belongs to the Cryptogamia Algæ in the sexual system, and to the natural order Algaceæ.

The following is the generic character:

Male—*Vesicle* smooth, hollow, with villose hairs within interwoven.

Female—*Vesicle* smooth, filled with jelly, sprinkled with immersed grains, prominent at tip. *Seeds* solitary.

This sea-weed is perennial, with the frond or leaf flat, smooth and glossy, from one to four inches long, and from half an inch to an inch and a half broad, furnished with a midrib throughout its length, dichotomous, entire upon the margin, and of a dark, olive green color, small spherical vesicles, filled with air, are immersed in the frond near the midrib. The fruit consists of roundish, compressed receptacles, at the ends of the branches, filled with a clear tasteless mucus. The plant grows upon the shores of Europe, and of this continent, attaching itself to the rocks by its expanded, woody root. It has a peculiar odor, and a nauseous, saline taste. Several chemists have undertaken its analysis, but the results are not satisfactory. It contains much soda in saline combination, and iodine, in the state of iodide of potassium.

The plant should be gathered at the period of fructification, about the end of June, and should be rapidly dried in the sun. This mode of desiccation is important, as, when dried by artificial heat, the plant never becomes friable. The preparations are: the decoction, made by taking one ounce to a pint of boiling water allowed to draw, in a covered vessel; cool, strain, etc. Dose, small teacupful three times per day or oftener.

The solid extract—made into pills, each pill containing $3\frac{3}{4}$ grs.; 3 pills may be taken daily, in the beginning and increased gradually to 24 pills, a quantity which has often been attained without the slightest derangement of the stomach.

A syrup may be readily prepared by dissolving the extract in a little diluted alcohol, and mixing this with syrup, in such proportion that a teaspoonful of the syrup shall contain a dose of the extract.

A very excellent fluid extract is prepared by percolation, without the aid of heat or exposure to the air. In our own experience we have found this form the most convenient and efficacious.

Since writing the foregoing, the following article has been sent to me: "Fluid extract *Fucus Vesiculosus*. Bladder-Wrack."

Subjoined is the mode in which *fucus vesiculosus* is employed by M. Duchesne-Duparc, who was the first to extol it as a means of counteracting obesity. He says:

"This remedy is best taken in the morning, fasting. Its use requires no change in the ordinary diet; I have always allowed persons to eat according to their desire; and apart from too much farinaceous food, beer, prolonged baths, and a too sedentary life, which is always necessary to avoid, I never impose serious privations.

"The action of the *fucus* on the system is very easily proved. After using it some time the patient feels lighter and more active; the stomach acts with more rapidity, and the hour of repast is more impatiently looked for. Flatulency diminishes and then disappears, with those who have habitually been accustomed to it. The act of digestion is no longer accompanied by flushings of the face, by fullness and weight in the epigastric region, and flashes of heat toward the head.

"It is not till after two or three weeks that we begin to observe special and characteristic phenomena; then the urine of those under its influence becomes generally more abundant and begins to present on its surface a coating, or black film. It is from this period that the resolvent properties are manifested, and the first intimation of becoming thinner are displayed. This result, which some look forward to with much impatience, is every day more decided, and, although variable in degree, has never yet failed.

"These different phenomena show us then in the *fucus vesiculosus* a real stimulant of the absorbent system, concentrating principally its actions on the fatty globules. The thinness which it determines is not always produced in a uniform manner. I have seen it limited to certain isolated parts, which are then almost always those where the fatty tissue accumulates in the greatest abundance. Thus, with one it is the chest, with another the abdomen, and with the third the nape of the neck and the upper part of the shoulders.

"But the destruction of fatty matter is not all that the resolving properties of the *fucus vesiculosus* is capable of accomplishing; from many observations seem to prove that the same properties may become useful in certain other diseases, such as cutaneous infiltration, passive dropsy, atonic gout, etc.

"There is one point to be mentioned which relates to the choice of the *fucus* which is of great importance. We know that the *fucus vesiculosus* belongs to a family which contains hundreds of species; that many of these are almost inactive, and the greater number of the others perfectly useless as remedial agents; hence it is absolutely necessary not to lose sight of the botanical characters of the true *fucus vesiculosus*. The neglect of this has given rise to daily deceptions, and I have seen many persons from this cause lose their time in prolonged and useless experiments. It was thus also that a patient who complained of having taken for three months, without any result, large quantities of *fucus* which I had prescribed for him, and, which upon being brought to me, I found to be common sea-weed. I am not ignorant of the difficulty which is experienced even in Paris, in procuring the true *fucus vesiculosus*; because I have had repeatedly offered to me, under that name, by justly celebrated houses, *fucus vesiculosus*, which is far from possessing the same activity. It may be added that *fucus nodosus* is frequently sold in this country for *fucus vesiculosus*; and that the same care is necessary here for the discrimination between the

true fucus vesiculosus and the various "sea-weeds" and "gulf weeds" which are offered for sale."

The above article is extracted from "Corpulence, or How to get Lean," by *Dr. Griffith*. Kenyon & Co., Detroit.

FUCUS VESICULOSUS.—I called the attention of the profession and the public to the above-mentioned sea-weed in the following article:

Since practicing medicine in the State of Delaware I have discovered a species of sea-weed, or sea-wrack, as it is commonly called here (fucus vesiculosus; common names, sea-wrack, bladder-wrack, etc.), that possesses the peculiar properties of diminishing the excessive accumulation of adipose tissue in the human system, without otherwise injuring the general health. An infusion is made from the weed by using one ounce, or a small handful, to a pint and a half of boiling water, allowed to draw in a covered vessel. Cool, strain, etc. The dose is a small teacupful three times per day, but no particular nicety need be paid in regard to dose or quality. Drank *ad libitum*, it will reduce a burdensome deformity, and at the same time ameliorate the general state, which may have been the primary source of the development of the adipose tissue. My attention was attracted to it by finding a patient who had been drinking of the infusion with the expectation that it would cure an inveterate form of *psoriasis*, a form of skin disease, as it has a popular reputation as a specific for that affection. He informed me that it had done him no good, but found that it diminished his fat quite considerably. I immediately took the hint, and secured a quantity of it myself, and commenced drinking an infusion of it; and, taking little or no other drinks, in the course of a few weeks my burdensome form grew "small by degrees and beautifully less," much to my satisfaction. I had ransacked the whole medical literary curriculum for a remedy that would do this without injuring the stomach, and producing a worse disease than the one it was given for, but failed to find it. Knowing with what anxiety the corpulent look upon their deformity, and how anxious they are for relief, I am anxious that the public should know of this harmless remedy. I administered it to three of my corpulent neighbors, with the following results:

In neither of the cases was it administered with any regard to regularity. In one case the loss was from twelve to fifteen pounds in about two months; in another the diminution in weight was thirty pounds in three months; in the third there was decided relief from the discomfort under which the patient labored, but as no attention was paid in regard to weight, etc., the record was not complete.

Great care should be taken in collecting, as there are many varieties of sea-weed, and it is easily confounded with other marine plants, which are entirely inert, so far as the peculiar efficacy is concerned in removing obesity.

Within the last few years many individuals, whom nature or their habits have endowed with an uncomfortable burden of polysarca or pinguitude, have carefully endeavored to follow the rules of diet and habits prescribed by Banting in his work on corpulency, and a great portion of these, after months of sacrifice in the pleasures of gastronomy, have abandoned the task, with the verdict, "Humbug!" But if those afflicted with *embonpoint excessif* will use the infusion of gulf-weed, as suggested, they may arrive at the desired degree of

attenuation. I can assure them that it will absorb fat with greater certainty than any other remedy known. It seems to act by the absorption of the adipose tissue, and modifies or lessens the secretions from the oily sudoriferous glands.

The above article was published in the *Baltimore American* over a year ago, and extracts from it were pretty generally published by the papers throughout the country. I received hundreds of letters making inquiry for the sea-weed, price, the source from which a supply could be obtained, etc. There was but a small quantity of it in the market at that time. I had a small quantity of the fresh weed, gathered at considerable expense. The weed was bulky and inconvenient for shipping, and the domestic preparation of the infusion was troublesome to prepare, and not an eligible form of administration. I, therefore, had manufactured a compound fluid extract containing all the properties of the weed in a concentrated form, with the addition of the other drugs known to be efficacious. To many of the applicants I sent the weed, and more preferring the fluid extract prepared by myself, it being a more convenient form of administration. I have received numerous letters confirming all we have claimed for it. Some few have stated that they received no benefit, or could not faithfully follow the directions. In most of the cases I have suggested a system of dieting in accordance with my ideas of the cause of corpulence, presented elsewhere. We have but few, if any, specifics in medicine; it is hardly expected that we should, owing to the diversity of constitutions, diseases, etc. We have no medicine applicable to all cases. That it is a specific, I do not claim. But that it will prove beneficial in a very large number of cases, I have not the least doubt, if the rules of dieting suggested are faithfully followed, and the amount of fluid drank is reduced to the least possible amount consistent with comfort.—*Corpulence, or How to get Lean*—Dr. Griffith.

THE PARAGUAY TEA.—This plant yields one of the most important of the vegetable products of South America. The Mate, or Paraguay Tea, occupies relatively the same position in South America which is filled in this country by the Chinese plant; and it is calculated that at least 8,000,000 lbs. are annually consumed in that country. It is yielded by the leaves and young shoots of a species, or of several nearly allied species of *Ilex*, not very dissimilar to the English holly. It is a shrub or small tree, with smooth, egg-shaped, irregular serrate leaves, and axillary racemes of small, white flowers, which are succeeded by berries as large as a pea. Mr. Miers has described several species in his paper on "The History of the Mate Plant," all of which produce the herb, and are by most authors considered as forms of one species, *Ilex Paraguensis*. In the settlements of the Indians in Paraguay, under the dominion of the Spanish government, the preparation of Mate—or Yerba, "the herb," as it was called—constituted the principal branch of industry in the country. The plant is prepared in different ways; sometimes the larger branches are roughly cut or torn from the plants and placed on hurdles over a wood fire until they are sufficiently roasted, after which they are placed on a hard floor and beaten. This operation knocks off the leaves and reduces them to a powder, which is then ready for use. More recently, however, the leaves have been roasted in large cast iron pans set in brickwork after the style in which Chinese tea is prepared; and, when they are sufficiently dry, they are powdered by machinery, and then packed in bags,

Like Chinese tea, there are different qualities made and known to the natives. The principal kinds are, first, that which is made from the half opened leaves; secondly, the leaves from which the midribs and principal veins have been removed; and, thirdly, the lateral leaves and young twigs, dried or roasted, and reduced to a powder. In this latter form it is packed very tightly into large bags, made of the skins of animals, or into the skins themselves, as may be seen in the Kew Museum, where there is an entire skin of the great ant-eater so packed. The unbroken leaves are put up into square packages of metallic paper, upon which is printed the name of the tea and of the firm selling it, and in this way it is a regular article of trade in most of the towns. These packages are very similar in appearance to the tinned paper packages of Chinese tea, often seen at grocers' shops in this country. With regard to the vessels in which the infusion is made (and which gives the name of Mate to the plant), they are formed either of gourds or of earthenware; if of the former, they are either carved or mounted in silver, and if of the latter, they are more or less painted with various devices, and glazed, the stem part of the gourd is not used as a spout, but a handle, a spout being unnecessary in consequence of the infusion being sucked through the tube, or bombilla; and these bombillas, like the cups themselves, vary much, both in the material used and also in the elaboration of the workmanship. The commonest is a simple tin tube enlarged at the base and perforated with holes; another kind is made of wicker-work, and the best of silver. These tubes, as well as the mounting of the cups, are often highly chased.

The Mate owes its refreshing properties, which seem to be very considerable, to the presence of a peculiar acid, as well as to theine, which has also been detected in it. The actual results of the use of Mate seem somewhat doubtful, for while some maintain that it will stimulate the languid, and at the same time calm the restless, others consider its use prejudicial to health. The Creoles of South America are especially addicted to the use of it, always taking a supply of the leaves with them in their travels, and drinking an infusion of them before each meal. The leaves will bear to be steeped two or three times, but fresh water must be used every time, and the infusion must not be allowed to stand or it will become deep black.—*London Garden.*

SULPHATE OF CINCHONIDIA.—The therapeutic value of the sulphate of cinchonidia has been pretty thoroughly tested in the wards of the hospital for the last seven or eight months, during which it has been almost invariably substituted for quinia wherever the latter would have been indicated. The results have been very satisfactory, and its use is still continued. It is employed as a general tonic, an antiperiodic, and is on trial as an antipyretic in typhoid. As a general tonic it has apparently been as effectual as quinia, its power in controlling malarial affection has been unquestionable, and it has seemed to possess very decided antipyretic properties, but has been used in too few cases, perhaps, to prove its power. The plan of administration has been to give one full dose once in twenty-four hours when some decided effect was desired, as breaking up the chills in intermittent, or reducing the temperature in typhoid; otherwise, it has been given in doses of from two to five grains three times a day.—*Report of Hartford Hospital—Boston Medical and Surgical Journal.*

SULPHATE OF CINCHONIDIA.—Dr. J. D. Searles, of Huntington, Ind., in the January number of the *Ohio Medical Recorder* says: In the October number of NEW PREPARATIONS is an article from the pen of Dr. T. M. Wright, of Troy, Ohio, on the use of cinchonidia, in which the doctor says he has abandoned the use of this remedy as an anti-periodic; and only uses it for tonic purposes. How Dr. Wright could be so unsuccessful in the treatment of malarial diseases with cinchonidia I am at a great loss to know. He says he has used two dozen ounces, and that it failed in at least three-fourths of the cases in which he tried it. I live in an intensely malarial region, and have had all the chances that any one could desire to test the anti-periodic virtue of this drug, and can truthfully say that in my hands it has proven to be superior to quinine. It has not failed in a single instance to promptly arrest the paroxysms of intermittent fever, or any disease of that class. I cannot see why this remedy acts so kindly for some physicians, and so unkindly for others; the only reason that I can give is that I fear some pass judgment upon it without giving it a fair trial. The extensive use that I have made of it during the last two years has forced me to the following conclusions:

1. As an anti-periodic it is superior to quinine.
2. It is milder in its effects upon the nervous system than quinine.
3. Children take it better than they do quinine.
4. The stomach tolerates it better than it does quinine.
5. The amount required in any given case is greater than that of quinine.

PROLONGED SYNCOPE TREATED WITH AMYL NITRITE.—In the *Practitioner* of December, Dr. William O'Neill reports a case of syncope occurring in a gentleman sixty-five years of age, suffering from hypertrophy with dilatation of the heart, in which amyl nitrite was administered by inhalation, from four P. M. to midnight, about two drachms in all being consumed. Giving a few drops at a time on a handkerchief, produced so little effect that the patient was allowed to inhale the fumes from the open bottle. The next day the face was much flushed, and this, with fever, lasted for a couple of days. Together with the amyl nitrite, warm applications to the limbs and general surface were found to be very useful.

DEATH FROM CHLOROFORM AVERTED BY THE INHALATION OF NITRITE OF AMYL.—We have received from a physician (*British Med. Journal*) the following interesting report for publication: "On the 29th instant, I was asked by a professional friend to administer chloroform to a patient of his, from whom he was about to remove a fatty tumor, situated in the left lumbar region. The patient in question was about forty-nine years of age, married, the mother of several children, of thin, spare habit, but otherwise in good health. She was nervous, and apprehensive of the result, entreating me not to give her too much chloroform. Having previously examined the heart and found all the sounds normal, I gave her about two teaspoonfuls of brandy undiluted; and after waiting a few minutes, and placing her in the recumbent posture, I commenced the administration. The chloroform I used was Duncan & Flockhart's, upon the purity of which we can always depend. I poured a measured drachm upon a piece of lint, enveloped in a towel. I held it some little distance from her mouth and nose, and let her inhale slowly. My friend noted

her pulse, whilst I carefully watched the respiration. The first dose did not produce any effect, and I then used another drachm, which soon caused a good deal of excitement, incoherent talking, and struggling—the patient striving several times to snatch the inhaler from my hand. This gradually subsided, and she appeared to be passing into the third stage of anæsthesia; when she made an abortive attempt to vomit, raised her head from the pillow, and, to my friend's great alarm, the pulse flickered and stopped altogether; she gave a gasp; foam gathered on her lips; her jaw became rigid; and to all appearance she was dead. I immediately withdrew the chloroform; my friend dashed some cold water on her face and pulled her tongue forward, whilst I commenced artificial respiration, after Marshall Hall's method, but without success. We then poured some nitrite of amyl on lint, and held it to her nostrils. In such emergencies it is impossible to judge the flight of time correctly; but I should say in ten seconds there was a flushing of the face, the pulse was felt, and, to our great joy, the all-important function of respiration was again restored; the woman being rescued apparently from the very verge of death. After a time, the anæsthesia seeming tolerably profound, my friend proceeded to remove the tumor, which he did in a rapid and skillful manner, whilst, as the patient grew restless, I gave an occasional whiff of chloroform. It proved to be an ordinary fatty tumor. Only one small vessel required to be ligatured. The wound has since healed rapidly, and the patient has made a good recovery. In looking at the order of symptoms, I cannot help forming the opinion that had it not been for the nitrite of amyl this poor patient would assuredly have died.”—*Canada Lancet*.

NITRITE OF AMYL IN DISEASES OF THE EAR.—Dr. F. Michael, of Hamburg, treated twenty-seven cases, and Dr. Urbantschitsch six cases, with this remedy. The results recorded by Michael are as follows: A greater or less degree of improvement was obtained in nineteen cases. Among these were three in which the tinnitus disappeared entirely from one ear, and in the other ear was somewhat diminished. In four cases, a by no means inconsiderable improvement in the hearing was observable. Three cases passed from observation. In the majority of the cases there was an otitis media hypertrophica. Of the cases not improved, one, and of those improved, two were labyrinth disease. Of the cases improved, one also was a purulent inflammation, accompanied by polypi. In all the cases improved the tinnitus was increased during the period of inhalation. In some cases the improvement lasted an hour, in others several weeks, but generally from two to ten days. In three cases, in addition to the diminution of the tinnitus, there was an improvement of hearing. In conclusion, the author says: “The introduction of a commended remedy can be hindered in no way so surely as by representing it as infallible. I desire, therefore, to repeat expressly that the desired effect was not attained in all cases; but I have as yet been unable to determine exactly in what class of cases of tinnitus the remedy is indicated. I can only say that the acute catarrhal cases, especially those in which the tinnitus is evidently of mechanical origin, are not appropriate subjects. The effect of the remedy in these cases indicate that its action bears a certain relation to the functions of the auditory nerve, or vascular branches of the labyrinth. I believe that its experimental use is indicated in obstinate cases of so-called nervous tinnitus, in labyrinth and middle ear disease, and

also when its effect upon the hearing is further confirmed, in nervous deafness.”—*Archives of Ophthalm. and Otol.*, p. 535.

VERATRUM VIRIDE.—Dr. John S. Lynch considers that the physiological actions of veratrum viride are twofold, nauseant or emetic, and vasomotor stimulant or arterial sedative. These two effects are due to the presence of alkaloids named veratria and jervia. The first named acts as a local irritant, an emetic, sometimes a cathartic, and, like all nauseants, a depressor of the circulation. The second, jervia, without producing either vomiting or purging, slows the pulse, probably by increasing arterial and capillary contraction, but without diminishing the force of cardiac systole.

The quantity or dose required to produce the full effect of the drug varies very greatly in different individuals, and beyond a certain point increase of the dose is not attended with increased effects. The writer says he has frequently exhibited drachm doses of the tincture without producing more effects than witnessed from five or ten drops.

Apart from its influence as an arterial depressant, veratrum viride has no anti-pyretic effect whatever. It is only, therefore, in those diseases in which the heat bears a distinct ratio to the rapidity of the circulation, and in fact depends upon increased oxidation merely, that this remedy can be expected to exert any anti-pyretic effect. In purely inflammatory diseases, it becomes the most potent, reliable and effectual remedy known to medical science. By its use a local inflammation which has produced a constitutional or sympathetic irritation can be restricted to its original locality, and the dangers of collateral hyperæmias and extension of inflammatory invasions completely prevented. In every condition, whether acute or chronic, in which there seemed to be danger of cardiac exhaustion and conservation of the strength of that organ is indicated, veratrum may be used without disappointment in the result. The writer does not claim that it will cure inflammation of any kind, nor does he know of any medicine that will do so.

Like digitalis, veratrum viride may be exhibited in diseased conditions which call for its use in large doses, and has the peculiarity of producing its effects suddenly, whether the effective dose has been large or small, and the effect produced does not seem to bear any relation to the amount taken. “Thus,” says Dr. Lynch, “I have witnessed a sudden slowing of the pulse, with vomiting and prostration, to as great an extent from five or six drop doses as when ten and even twenty times the quantity had been used.”

The nausea and vomiting so frequently noticed accompanying the action of this remedy may be entirely prevented without in the least modifying its action upon the heart, by combining it with some one of the preparations of opium. Another means of modifying the local effect of the medicine upon the stomach is the exhibition at the same time of moderate doses of carbonate of sodium or potassium.

Veratrum cannot be combined with alcoholic stimulants in any form, since these are physiologically antagonistic to it as far as its action upon the circulation is concerned.—*Trans. Med. and Chirurgical Soc. Maryland*.

PHOSPHIDE OF ZINC IN HYSTERIA.—Dr. Em. Gross speaks of a case of long-continued hysteria cured in five days by phosphide of zinc, from one to two-fifteenths of a grain in granules having been given with food thrice daily.—*New Remedies*.

Publisher's Notes.

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NEW PREPARATIONS.

Vol. 2.

Detroit, July 15, 1878.

No. 3.

Original Communications.

More About the Nucleus in the Red Blood-Corpuscle.

BY CHAS. H. STOWELL, M. D.,

Of the Physiological Laboratory of the University of Michigan.

SINCE communicating to you my last, several experiments have been performed at the laboratory, to further decide the question of a nucleus in the red blood-corpuscle of the mammalia.

In answer to your note, we would say that this nucleus has been seen by several histologists and physiologists, both in this country and abroad; but when their methods of work have been published, and others have followed their directions, errors have invariably been pointed out, and the then so-called nucleus was absorbed in "optical delusions," and changes brought about by the reagents used.

My experiments were performed on cats and rats, poisoning them with solutions of corrosive sublimate—in some cases bringing on death immediately, in others not until the lapse of several days. The blood was examined both before and after death, and no change was discerned in the appearance of the blood-corpuscles, except in a few instances, when there was noticed some change in their shape. This is not what one would anticipate from a perusal of Prof. Boettcher's article.

However, by following the method given in the last number of your journal, we have demonstrated this nucleus in the red corpuscle of man (as previously reported), the dog, cat and rat. The most satisfactory results was obtained from the blood of the rat; the most unsatisfactory from that of man. No value, however, is attached to this fact.

By using higher powers than at first employed, we are positive there is a granular appearance to this nucleus, not present in other parts of the blood cell. In some cases this is quite marked, especially when the nucleus is large; and also in those corpuscles where we have seen a nucleolus, this granular structure is very evident. This is what we should expect when accepting Beal's theory of protoplasmic matter.

In some specimens examined, the proportion of nucleated to non-nucleated cells was very small indeed; while in other specimens the proportion was much greater. The question to decide is—Has fasting or feasting anything to do with this? Upon this point you may expect to hear something further, as the results of experiments we intend to make this summer.

Yerba Reuma.

By J. H. BUNDY, M. D., Oakland, Cal.



SINCE my last paper on this drug, I have treated a large number of cases of coryza and ozena with results of a most satisfactory character, some yielding readily, others more tardily, but surely and steadily, to a termination perfectly satisfactory to my patients, and highly gratifying to myself. Mr. C. called for treatment; had suffered for years with catarrh; breath offensive; pain through molar bones and bridge of nose, passing back into basilar regions; considerable discharge from posterior nares into the throat, with dry hacking cough; felt drowsy and languid, with no disposition whatever to attend to business. Had taken and used all the remedies of the day for his condition, and failure after failure resulted in perfect discouragement to him, as he had given up hopelessly. I examined him closely and carefully. Found the middle and upper aspect of the canal or cavity thoroughly filled with crusts and pus, which extended backward to above the uvula, and the uvula itself also loaded with the discharges. I prescribed:

R. *Fl. ext. yerba reuma*, ℥ ss.
Aqua dist., ℥ iij ss.

M. Sig.—From the hand snuff one teaspoonful three or four times daily, after thoroughly cleansing the parts in the same way with warm water.

R. *Fl. ext. berberis aquifolium*, ℥ ij.
Aqua dist. and syr. simp. aa., ℥ iij.

M. Sig.—Take one teaspoonful four times daily.

After three weeks' treatment there was no further formation of the crusts, the secretion, which was excessive, thoroughly restrained, appetite good, drowsiness subsided, and the patient cheerful, and delighted with his prospect. Continued the treatment for twelve weeks when the patient was discharged *well*, and perfectly satisfied with treatment.

Mr. F., aged 40, applied for treatment. He could not tell how long he had been troubled with catarrh. Had constant pain in the eyes and back of head; said he always had cold, and was constantly sneezing, which kept up hoarseness and sore throat. Would be taken sneezing suddenly, ocular conjunctiva highly injected, and, as he said, a stream of water constantly flowing from the nose and eyes. His general health did not seem to suffer much.

R. *Fl. ext. yerba reuma*, ℥ ss.
Aqua dist., ℥ iij ss.

M. Sig. From the hand snuff one teaspoonful three or four times daily. Had suffered from constipation some.

R. *Fl. ext. berberis aquifol.*, ℥ ii;
Fl. ext. cascara sagrado, ℥ i.
Syr. simp. ℥ iij.
Aqua. dist., ℥ ii.

M. Sig. Teaspoonful 3 times daily. Continued treatment nine weeks, and was discharged.

Mrs. L., about 40, had suffered from cough for two years—constantly hawking, and spitting the moment she would lie down (could not sleep or rest well on this account). She became alarmed about herself as she was sure she was expectorating tubercles. From examination I found a bad case of ozena, involving the osseous structures to some extent. I found that the tubercles she was expectorating came from the posterior nares, and also I found them about the curtains of the fauces, firmly imbedded into cavities which they exactly filled. I removed a number of them. Their size varied from that of the head of a pin to that of a common pea, and their fetor was unbearable. Her symptoms were anomalous—pain in the head, chest, back, and limbs, occasionally partially deaf, and a long train of nervous symptoms that tires one to listen to, or relate. She lived close by, and I directed her to visit my office every other day. With warm water (and cold water should never be used locally in catarrh as it invariably produces symptoms of acute coryza, which are very distressing, and which will last for hours), and a nasal syringe with a crooked nozzle I freely irrigated the nasal cavities by injecting postero-anteriorly, and *vice versa* (using considerable force with the spray), until I had thoroughly cleansed the parts. I then used one syringeful of:

℞ *Yerba reuma fl. ext.*, ℥ ss.
Aqua dist., ℥ iij ss.

M.—Giving her a bottle of the same to snuff 3 times daily.

℞ *Berberis aquifol.*, fl. ext., ℥ iij.
Syr. hypophosphites co., ℥ iv.

M. Sig. Take teaspoonful 3 times daily. I kept up the irrigation and injection for six weeks, when it was discontinued. There was no change in treatment from this time for ten weeks, when she was discharged fat and happy. I gave the hypophosphites as a restorative from the fact of her being much reduced in flesh and strength, and the nervous system quite prostrate.

Mr. H., aged 28, had suffered two years with nasal catarrh. The left cavity was much thickened and swollen, so much so as to obstruct the passage of air or liquids through it to some extent; had a dry hacking cough with considerable bronchial irritation.

℞ *Fl. ext. yerba reuma*, ℥ ss.
Glycerine, ℥ ss.
Aqua dist., ℥ iij.

M. Sig. With a syringe inject one teaspoonful antero-posteriorly 3 times daily.

℞ *Iodine*, ℥ j.
Chloroform, ℥ iij.

M. Sig. Use as inhalation 3 or 4 times daily through the nostril, as one would of smelling salts, for a few minutes, or until the effects of the chloroform was felt, then desist.

℞ *Fl. ext. yerba santa*, ℥ i.
Fl. ext. berberis aquifol., ℥ ii.
Glycerine, ℥ iii.

M. Sig. Take teaspoonful 3 times daily. Made no change in treatment from beginning to end, and at lapse of 14 weeks the thickening was entirely removed, bronchial irritation and cough had disappeared, and the case discharged. It should hardly be necessary to state that catarrh in all its forms is a subtle and stubborn malady to treat, and that persistence is necessary if you would perfect a cure. If the case is a bad one, I invariably use the syringe myself, and it is a matter of considerable importance that one should be skilled in its use lest

he inflict some injury to the soft parts of the throat, and posterior nares; and it is equally important in many cases that the physician himself should use it in order to reach all the recesses of the parts.

All of these cases require constitutional treatment, and for this purpose the berberis aquifolium fills the indication to the letter. The state of the bowels may need attention; if so, nothing will prove as satisfactory as the cascara sagrada. I have a large number yet to report, but time forbids. More anon.

Yerba Reuma.

By C. W. HANSEN, M. D., Oakland, Cal.



MY experience with this remedy has demonstrated to my satisfaction that, locally applied, it is a specific in chronic inflammation of mucous membranes, attended with hyper-secretion of mucus, and consequent partial denudation of the epithelial covering, causing the patient to complain of a feeling of rawness, and also where destructive ulceration is going on, as indicated by a purulent discharge. It matters not whether the disease be called gonorrhœa, cystitis, bronchitis, or nasal catarrh, in the chronic forms of either, when presenting the conditions mentioned above, yerba reuma has proven a most valuable remedy in my hands. In hypertrophy of mucous membranes I prefer the carbolate of iodine.

Probably the greatest benefits to be derived from yerba reuma is in the treatment of *chronic nasal catarrh*. Even when the disease has progressed so far as to partially destroy the turbinated and other bones, the remedy will arrest the progress of the disease in a remarkably short time! Too much stress cannot be laid on the mode of application; in nine cases out of ten the main seat, the stronghold, I may say, of the disease, is in the *vault of the pharynx*, and the only certain way I have found of reaching it is through the *curved nasal syringe*; the hydrostatic and other methods are all very good, as far as they go, but they fail to reach the majority of cases.

In taking charge of a case of catarrh, I always insist on the patient coming to my office, at least three times a week; then, after injecting salt water a few times to cleanse the membrane of accumulated mucus, or muco-pus, as the case may be, I use an injection of

Fld. ext. yerba reuma, ℥ j.
Aq. destillata, ℥ iij.

adding a few drops of carbolic acid, if there be much fetor. With a little dexterity and practice, the nozzle of the syringe can be passed behind the velum pendulum palati, and the several injections made, with scarcely any inconvenience to the patient. I also give the patient a bottle of the same mixture, directing a small quantity to be snuffed from the palm of the hand, through each nostril, two or three times daily. As to the constitutional disturbances, of course they will require appropriate treatment at the same time. Whether yerba reuma will prove to be of value as an internal remedy remains to be seen.

A Case of Syphilis Treated with Berberis Aquifolium and Yerba Reuma.

By W. PATTON, M. D., Galena, Mo..



ON the seventeenth of January last Mr. H—— applied to me for treatment, stating that twelve years previous he had the misfortune to contract syphilis, which produced a few chancres

on the penis. Upon the application of nitrate of silver they soon disappeared, but in a few weeks three carbuncles (as he supposed) made their appearance on the back, to the left of the spinal column, one near the lower cervical and the other two near the upper dorsal vertebræ; also one at the articulation of the right and left clavicle with the sternum. I found these ulcers each about one and a half by two inches, with notched or ragged edges, and discharging an offensive pus. He complained of rheumatic pains in his limbs, and said that small blisters (as he termed them) frequently made their appearance in different parts of the mouth, throat and on the tongue, but yielded to the application of nitrate of silver. His bowels had been more or less constipated for several years, and for six years had never moved without heroic doses of cathartic drugs—requiring sometimes from four to eight U. S. P. compound cathartic pills.

I placed him upon the treatment usually adopted in such cases, but up to May 7th I had made no progress or improvement in his case. I then, having received a small stock of new preparations from Parke, Davis & Co., prescribed the following:

R. *Cas. sag., fl. ext.,* ℥ij.
Berb. aqu., ℥ij.
Simp. syr., ℥iv.

M. S. Two teaspoonfuls three times daily.

I prepared tincture of yerba reuma fluid extract iv 3 to 25 per cent alcohol vi ℥, and directed that a piece of lint be thoroughly saturated with this tincture, and placed in the cavity of each ulcer, and confined by being covered with adhesive plaster; these to be changed three times daily.

The seventh day I found a healthy granulation set up, the cavities already filling up with sound flesh, but the bowels yet obstinate, having moved but twice in that time.

I then increased the dose of cascara sagrada to 13 three times daily. This produced one action daily for about a week, when the bowels became too lax, and I decreased the cascara sagrada to xx gtt. three times daily. I continued this treatment four weeks, when, upon examination, his bowels were regular, his complexion clear, digestion good, and the ulcers nearly healed over.

Having no more berberis and cascara, I discontinued all treatment except the local application of tincture yerba reuma.

At present writing the ulcers appear to be permanently healed, and the patient says he feels as well as he ever did in his life.

Cereus Bonplandii.

By RICHARD E. KUNZE, M. D., New York.



EREUS Bonplandii, the new remedy for cardiac diseases, first introduced by me six years ago, is possessed of such remarkable properties that it deserves of another passing notice.

Those not acquainted with this plant may be glad to know that it is one of many night-blooming torch-thistles, or cacti, inhabiting portions of Mexico and Central America. The flowers are produced in July, and each lasts but one short night. For other particulars see my monograph.

The action of *Cereus Bonplandii* on the system is through the vaso-motor nerves, which it stimulates to normal conditions, and it should not be classed as a direct arterial sedative. It is not a depressant narcotic, but rather a promoter of buoyancy, the necessary balance between health and

disease. Has been successfully used in curing functional derangements, as well as alleviating the gravest lesions of the heart known. By its action through the trophic nerves, it has been used with success in amaurosis, as well as to remove sluggish functions of the uterus. It has a tendency to check hemoptysis, by controlling irritation of the pneumogastric nerve, which receives some filaments from the sympathetic system.

A few cases will serve to mark out its range of action, with a view of the comparative result. The first is one of an organic lesion, which, though incurable from the effects of injuries received, was nevertheless alleviated of its acute sufferings, and the life of the patient made comfortable, as well as prolonged under the influence of this drug.

Case of *Fatty Degeneration and Hypertrophy of the Heart*, with *Dilatation of Ascending Aorta* and general *Atheroma*, caused from pericardial adhesion, the result of a crushed sternum during a railroad disaster.

Five years ago I attended William G., æt. 45, by occupation a teamster, suffering from several broken ribs and a crushed sternum, received from a train of cars backing up into the truck, he was driving across a railroad track. He seemed to recover in the course of a few months, with the exception of occasional chest-pains.

About the middle of June, 1876, he first complained of false angina pectoris, or *cramp* of the heart. Pulse 90, full and compressible, with an *irregular*, tumultuous action of the heart; acute palpitation and dyspnœa a prominent symptom, aggravated by any exercise. Placed him under various remedies, with changeable results, and ameliorated his sufferings. During the spring of 1877 he was subject to many paroxysms of "angina," with incubus, and cardiac asthma, or dyspnœa. Had not worked for six months, and now, in making an attempt, it resulted in cardiac disturbances. Pulse now *intermittent*, 66-68 per minute. Mitral murmurs were heard, and during intensity of heart's action, the radial pulse increased to 96. April 28th I prescribed:

R. *Tinct. cereus bonplandii,* ℥iij.

Sig. Twenty drops in water every two hours till relieved.

June 6th—Much improved every way. Suffers less cardiac pain, and has only one attack of angina per day. Has worked the past two weeks, and did not use the medicine very regularly, only twice a day.

R. *Tinct. cereus bonplandii,* ℥iij.

Dose the same as before, twice a day, or oftener if indicated.

Oct. 6th.—Walking seems to induce palpitation more readily than working. Complains of severe pains in both arms from axilla to wrist. More dyspnœa when going up stairs. Is liable to cardiac syncope.

Oct. 16th.—Paroxysms increase again, and the pulse is now both *irregular* and *intermittent*. Cardiac pains more steady, though not severe while taking the medicine. Cannot work any longer. Much apprehensiveness.

Dec. 28th.—Had been one month in St. Mary's Hospital, of this city, where the attending physicians failed to diagnose the case, and no medicine was administered. His condition now was as follows: Pulse, intermittent in rhythm; full, hard, regular in volume, and 80 beats in a minute. Auscultation revealed some mitral regurgitation, with *bruit de souffle*, and irregularity with intermittency of cardiac sounds. Condition at the aortic valves very much the same, excepting the absence of

murmur. The *cereus bonplandii* relieved him of the more distressing symptoms at all times.

May 29th, 1878.—During the past four weeks had many bad spells. Looked emaciated, from anorexia. Œdema of lungs. Pulse irregular, intermittent and varying from 40 to 86 beats to the minute. There was mitral regurgitation and *frémissement* at the seventh costo-sternal articulation of right side, with descent of all the sounds. The end was real at hand.

May 30th.—Patient died from paralysis of heart, due to failure of the ventricles in contracting upon the over-distended chamber.

Post-mortem disclosed extensive pericardial adhesions, hypertrophy of the entire heart (it weighed 24 ounces) with degeneration and dilatation of ascending aorta, with atheroma of the same. All the valves were stiffened and thickened with atheromatous patches. Fibrinous coagulum under tricuspid valve. Congestion of lungs.

Case of *Nervous Palpitation* from grief.—Mrs. Clinton C., æt. 26, of Dorchester, N. B., consulted me September 8th, 1877. Married four years. Lost within the short period of a few years, her father and four brothers and sisters, all of them from consumption. Despondency and loneliness, her husband following the sea, were the prime factors of her sufferings—besides which she belonged to the emotional sphere—sanguine, encephalic temperament.

Noticed palpitation first four years ago, and since then undue excitement and over-work of any kind proved to be the other factor. Attacks preceded by flushed face, then violent palpitation and followed by dyspnoea and lancinating cardiac pains. As she expressed it, the heart would seem to jump up into her throat, causing temporary suffocation. This was followed by that weightiness upon the heart which we call incubus. Extremities cold, succeeded by a quivering of the surface, and finally tremors, if not surrounded by sympathizing friends. She had likewise been troubled with slight attacks of hemoptysis, for which her family physician advised a trip at sea.

Pulse 86 per minute, regular in time and rhythm, though feeble in force. During a paroxysm it would at times intermit and accelerate in frequency, the former of which was due to nervous depression. All other functions were performed with regularity of habit. I prescribed:

R. *Tinct. cereus bonplandii*, ℥ iv.

Sig. Ten drops in a little water every three hours, and during a paroxysm every half-hour till relieved.

In connection with this case, I should say that the patient was subject to fugitive attacks of passing excitement from but little cause.

Dec. 18th.—The husband of this patient called to inform me that his wife was gradually coming under control while using *cereus bonplandii*, and that her health was much improved ever since she first took the medicine. Had less palpitation and fewer paroxysms; nor was she quite so nervous, generally speaking. The severe cardiac pains were also proportionally less than formerly. He had just received a letter, since leaving port, requesting him to take home some more of that medicine, which she had just got out of. It made her feel so much better that she wanted some at once. Prescribed:

R. *Tinct. cereus bonplandii*, ℥ iv.

Sig. Ten drops in water three times a day.

March 20th, 1878.—I was informed by friends of my patient that she was doing nicely, and quite relieved of her former troubles.

Many other cases might be cited to establish the superiority of this over other cardiac remedies, if it were not superfluous to do so. I will conclude my remarks by saying that this drug is of a harmless nature, and may be administered under all existing conditions, when indicated. The following cases are some of a number of amauroses, where the sight was permanently re-established:

The astonishing effect of *cereus bonplandii* in that exhausted condition of the retina, that delicately expanded portion of the optic nerve, upon the surface of which the images of external objects are received, led me to renew investigations with this drug.

To establish its merit unbiasedly I gave the drug *alone*, that is, without having recourse to any other treatment.

Having been somewhat skeptical as to its range of action, I had a patient selected to try the effect of *cereus bonplandii* in a well-marked case of amaurosis.

Patrick McCann, fifty years of age, unmarried, presented himself as a charity case for treatment, August 15, 1877. He had been employed in slaughter and ice-houses of this city and vicinity for a number of years past. He was suffering from amaurosis of the left eye, and had, besides that, also conjunctivitis in both. Then there was complete opacity of the right cornea—the result of a slung-shot wound received twenty years ago. He was very anxious to have the left eye saved, having an aged mother to support, and being part of the time unable to work on account of his liability to frequent attacks of conjunctivitis. Blind in one eye, with the chances of losing the sight of the other, made Patrick very despondent. To comprehend the exact condition of this case we give the history of the patient.

Had no more conjunctivitis until about five years ago. He was then working in the Communipaw Abattoir, located directly over the course of the Hackensack River, near Hudson City, and from exposure caught cold in his eyes, resulting in inflammation, so that he could not see with his left eye at all. In consequence he was unable to work for three months, during which time he used domestic remedies, such as lotions of sulphate of zinc, and chloride of sodium. He thought that he had outwitted the doctors.

In the autumn of 1875, while working in another slaughter-house, he again contracted a cold, which so affected his eyes that, after staying four weeks at his post, he had to give up work altogether. Could see very little with the left eye, and at times none at all. He was then under homeopathic treatment, with varying results—now better, and then, perhaps, worse again. Though not at work during the winter, he was often troubled with shooting pain in the left eye, and had occasionally an attack of conjunctivitis.

Early in June of 1876 he got work in an ice cellar of a packing-house, where he was not able to stay longer than a week. He called in the aid of his last medical adviser. The left eye troubled him very much; could hardly see at all. Not obtaining much relief he was told to go to the Ophthalmic Hospital (homeopathic) of this city, which he complied with. The attending physician gave him some powders for internal use, and advised him to continue bathing the eyes with warm water to control the inflammation of the conjunctiva. Carried out this treatment for four weeks with no better results. He next tried the Manhattan Eye Infirmary of this city, where he had his eyes washed and syringed with a solution of nitrate of silver. A few weeks of this treatment sufficed for him, to return back to the New York Ophthalmic Hospi-

tal, where the treatment was more humane. But he was gradually getting worse, notwithstanding the kind treatment accorded him at the latter institution. There seemed to be no change in the treatment, and he got tired of going there any longer. He went back again to the Manhattan Eye Infirmary, and without informing the attending physicians of the fact, kept going alternately to either of these two institutions, taking the benefit of the external application of allopathic treatment, and thinking it quite safe to swallow homeopathic attenuations at one and the same time! At the end of another four weeks' benefit of such combined treatment, he was finally told by Dr. D. W., of the Manhattan Eye Infirmary, that unless he submitted to an operation he would never recover the use of his eye. This so scared him that he did not return. About the same time he went to have a tooth extracted by Dr. N., and the latter requested him to put himself under my treatment, as a last resort.

He had slight pains in the left eye, and the conjunctiva looked inflamed, indicating a chronic condition of the mucous membrane. Could not bear a strong light without having a painful feeling in the eye. Could not distinguish two-inch block letters at a distance of fourteen feet, although letters of double that size he could make out very well. Neither could he read twelve-inch letters across the street, a distance of eighty feet. When attempting to read print by means of strong eyeglasses his eye became bloodshot and watery. A strong sunlight would similarly affect him. During the night the edges of the tarsal cartilages were slightly agglutinated,

We gave this patient:

R. *Tinct. cereus bonplandii*, 3 i.
Aqua, $\frac{3}{4}$ viii.
Misce.

Sig. Take one teaspoonful three times a day.

To prevent him from using any other lotions, I advised him to bathe the eyes with warm water quite frequently.

He returned in about three days, saying that his eye felt stronger, notwithstanding the dust of the street. He could read two-inch letters fourteen feet distant. Ordered him to continue treatment. In one week from the time he commenced taking *cereus bonplandii*, he declared that he felt so much improved in every way that he could perform any kind of work without further inconvenience.

Sept. 6.—Called to have his medicine renewed. Says that he had not felt so well for months. Conjunctivitis does not trouble him any more. Can see as well and as far as ever. After reading, however, eye feels a little weak yet. Continue same treatment.

Sept. 26.—He reported himself entirely cured, but wished to take another bottleful of the same medicine, as a precaution, and gladly I assented to his request. It will be seen that the exact quantity of tincture used was about two drops, or one minim in each dose. June 1, 1877, the last time that I met this man, he was as well as ever before in his life.

The next case of amaurosis successfully treated with *cereus bonplandii* was a patient of Albert Fox, M. D., of Pawling, Dutchess county, N. Y., who had obtained the remedy used from me, and kindly furnished the following information of this most interesting case:

"Case of Amaurosis.—Was called to see Mrs. S., of the town of Pawling, April 26, 1876. Patient about 35 years of age. On arriving at her house, found that she had been suffering from severe pain in the head since the 22d of April.

She was attacked after hurried exercise up and down stairs. It was preceded by weariness which was hard to overcome. When about half way on the cars between New York City and Pawling, this pain in her head was severe. In going from the railroad station to her home her husband had to use great care in driving, as every jar increased the pain.

"On arriving, found her with pupil dilated, and the eye expressionless. In answer to my questions, she said the pain was not so hard as it had been, but there was a strange, uneasy feeling in her head, that was harder to bear than pain, making her feel very bad. Pulse unsteady and intermitting. Bowels in good condition. Urine appeared normal. Appetite good. When she ate, she felt after her food like one in the dark. Asked her if she could see me (I was standing beside the bed), and she said that she could see something, but unable to tell what it was. She said, 'Doctor, shall I be blind for the rest of my days?' We told her that we could not tell. She said that her folks were afraid that she would always be blind. We asked why she did not call me before. She said that she was subject to headache, and not at all worried about it till she found that she could not see. She wanted me to give her something to make her quiet.

"Treatment of this case was nearly as follows:

R. *Tinct. gelsemini*, . . . gtt. xx.
Aqua, $\frac{3}{4}$ iv.
Misce.

Sig. Take a teaspoonful once an hour, and alternate with the following:

R. *Tinct. cannabis Indica*, gtt. xx.
Aqua, $\frac{3}{4}$ iv.
Misce.

Sig. Take a teaspoonful every hour.

"April 27.—Patient more quiet, no improvement in her sight. Gave her *tinct cereus bonplandii*—gtt. v., in half a tumblerful of water, of which to take a teaspoonful every hour, and alternate it with *tinct. gelseminum*, the same as before omitting the *cannabis Indica*, unless uneasy.

"April 28.—Found the pulse more regular. Thinks that she can see a little better. Feels quiet. Gave her *tinct cereus bonplandii*—gtt. x. in four ounces of water, and of which to take a teaspoonful once an hour. And of quinine, about one-fourth of a grain, once in four hours, omitting the use of gelseminum.

"April 30.—Can outline objects. Treatment continued.

"May 3.—Uneasy feeling in head gone. Can see objects very well. They appear as though looked at through a smoky atmosphere. Same treatment continued.

"May 7.—Feels better. Can see more distinctly. Sight improving daily. Is full of hope. Continued treatment.

"May 12.—Convalescent. Things look a little blurred by lamp light, the same as when we are in need of eyeglasses. Continued treatment for a few days more, and has remained well up to present date, Jan. 13, 1878.

Cascara Sagrado.

By S. E. PEARRE, M. D., Oakland, California.



HAVING my attention called to cascara sagrado, by my friend, Dr. Bundy, I have been using it in a number of cases, with the following results:

CASE I. A gentleman, about 35 years of age, generous liver, but entirely temperate; had

been affected for years with inactive liver and constipation, with very stubborn ulceration of the rectum. His skin was sallow, strength feeble, etc. He had been having constant and varied treatment, without relief. I prescribed cascara alone, with direction to use one teaspoonful, once or twice a day until the bowels opened, then in reduced doses sufficient to secure a natural action, but to fall short of producing catharsis. He being a stock broker, I sent to him not long after, on some business connected with a mine. After answering the business, he added, "Send me another bottle of that medicine; there is more money in that, than in the mine." He continued the use of cascara a little longer, and is now gaining flesh, skin clear, bowels regular, liver active, and the ulcerations of the rectum very much better, and steadily improving.

CASE II. A lady in San Francisco, middle-aged. Has had constipation so stubborn, that for years she has not had an action of the bowels without an injection of water; hemorrhoids and prolapsus of the bowel so bad, that this action was always secured just before retiring at night, in order to have the benefit of a recumbent position, to allow the bowel and tumors to resume their natural position. I prescribed cascara alone, with direction as in the other case. After the use of two ounces, she sends me word that she has not been so well for years: bowels regular, and the hemorrhoids and prolapsus so far relieved as so render her comparatively comfortable.

Other cases.—I have prescribed the remedy in quite a number of other cases with results which have led me to the following general conclusions?

1. In cases where there is torpor of the liver, with an atonic condition of the stomach and bowels, it is the very best remedy I have ever tried. 2. That the more concentrated the remedy, the more active it is, even though the same amount be given. Indeed, I have in several cases, when the constipation has been but moderate, given it in a diluted form and have found that it greatly increased the difficulty; but the administration of a concentrated preparation gave relief. It seems to be one of those remedies that have two opposite effects, according to the amount given, and especially according to the dilution of the preparation. 3. Combined with the properties indicated above, it has a manifest tonic influence on the liver, the stomach and bowels. In my opinion, it possesses, in addition to its curative effects in constipation, all the properties of the wild cherry, but in much greater intensity. I am inclined to think, also, that it possesses decided cholagogue properties. I esteem it a very important addition to our materia medica.

Cascara Sagrado.

By DR. S. M. KESSLER, Winfield, Kan.

WM. H—, aged 30, a stonemason, applied to me April 6th, 1878, for treatment. Upon examination I found the following symptoms: Impediment of the portal circulation, unhealthy bilious secretions, yellow color of the skin and eye, and *obstinate* constipation with stool once in four or five days, weakness and trembling of the limbs, with drowsiness. Tenesmus accompanied the effort at stool. Chionanthus and hydrastin failed me. I finally commenced the following treatment, with success:

R *Sulph. quinia*, thirty grains.
Ext. *nux vomica*, five grains.

Mix and divide into 20 pills. S. One each night upon going to bed. During the day I gave the following:

R *Cascara sagrado*, ʒj.
Glycerina, ʒij.
Aqua, ʒj.

M. S.—Teaspoonful every three hours. Improvement commenced within three days; constipation gone; stool daily, without difficulty, and a full relief of all the other symptoms. He had been under treatment, and unable to work for over a year. I consider cascara sagrado the greatest known remedy for any disease of gastro-intestinal tract, accompanied with constipation.

Cascara Sagrado.

GEORGE W. SMART, A. M., M. D., Canaan Four Corners, N. Y.



ALTHOUGH in these days of nostrums I have somewhat of a conservative feeling, I procured, through John T. Fink, of New York, a small supply of cascara sagrado ex. fl., and, having given it a fair trial in several cases, desire to report progress. My testimony is, that the introduction of this medicine is a boon to the profession, Dr. Bundy claiming for it no more than its actions justify.

As a cholagogue, I have had a *personal* experience; find it just as certain, but a little slower, than the blue mass, for which I am glad to find an efficient substitute, free from the harshness of podophyllin, etc. In chronic constipation it is invaluable; its action good, producing full, easy, pleasant stools, without any tormina, tenesmus, or nausea. In dyspepsia it is superior to many other remedial agents, in that it is pleasant to take, and produces no nausea. In such cases I prefer to give it without the syrup, substituting glycerine.

I intend at an early date to give the *æsculus glabra* a fair trial, when it will give me pleasure to report.

Berberis Aquifolium.

By I. J. M. GOSS, M. D., Marietta, GA.



BERBERIS Aquifolium is one of the most valuable new remedies, lately given to the profession by the scientific investigation of Dr. Bundy, of California. I procured a pint of the Fluid Extract from Parke, Davis & Co., and tested its alterative or catalytic powers in syphilis. I find that it has the two essential properties for struma, scrofula and syphilis—that is, tonic and catalytic powers. It is these two properties that give to corydalis its superior powers in many diseases in which it has been found to be so efficient.

Dr. Bundy believes that this remedy is so very efficient as not to require the additional aid of the iodides; but I think that vegetable alteratives do their part of the cure; but the iodides also have their part to perform. I think that the berberis aquifolium has the remarkable power to break up impure or virulent material in the tissues, and convey them out of the body; at the same time it has such remarkable tonic powers as to improve the tissue-forming functions of the assimilating organs, hence its very prompt power in curing scrofulous, strumous, and syphilitic affections. I regard this as one of our most valuable acquisitions to the list of therapeutical remedies. When it can be procured pure (as it may be from Parke, Davis & Co.), it will be found to be one of our most active alteratives and tonics.

Berberis Aquifolium in Amenorrhœa.

By W. PATTON, M. D., Galena, Mo.



Y second case upon which I tested the new preparations was a young lady 22 years old, who, after arriving at the age of puberty, by imprudently exposing herself, fell a victim to amenorrhœa, which was neglected until she became pale, debilitated, nervous, with frequent palpitations of the heart, a sense of suffocation, difficulty of breathing, pulse weak and irregular, digestion impaired, pains in bowels and back, almost daily headache, cold hands and feet, facial neuralgia, rheumatism, and for years past has had leucorrhea.

I think it was about the 8th or 9th of May I visited her for the first time, and I must confess I felt that I had a hopeless case, but I concluded to try berberis aquifolium and cascara sagrada. I prescribed:

R *Berberis aquifol.* fl. ex., $\frac{z}{3}$ ij.

Cas. sag. fl. ex., $\frac{z}{3}$ j.

Syr. simp., $\frac{z}{3}$ ij.

M. S. Forty drops three times daily, gradually increased to sixty.

Also prescribed:

R *Tinct. coca*, $\frac{z}{3}$ iij.

Ail. gland., $\frac{z}{3}$ ij.

M. S. One teaspoonful three times daily in half a tumbler of water, two hours after taking dose of former prescription.

The tincture coca I prepared by adding six grains solid extract coca leaves to each drachm of alcohol.

I now left my patient, not to return until the eighth day, unless called sooner.

On my return I found her general condition so greatly improved that I was utterly astonished.

Without drawing on your valuable space, to write up minor details, I will add that to-day she is rapidly gaining flesh; appetite good, free from pain, leucorrhœa ceased, healthy menstruation re-established, and no unpleasant or uncomfortable feelings, and all accomplished by the above treatment.

Fucus Vesiculosus.

By A. F. HAGADORN, M. D., West Bay City, Mich.



T your solicitation I send you my very limited experience with fucus vesiculosus. On Nov. 26th last, a married lady, Mrs. E., consulted me with reference to what seemed to her "an alarming condition," caused by excessive secretion of fat. She was growing weaker every day; had no ambition, and it was really a burden to carry so much adipose tissue. Knowing that alkalies were likely to derange digestion, I determined to try fucus vesic., and accordingly ordered, through a druggist, Mr. Oscar L. Braddock, a half-pound bottle, and directed her to take a dessert spoonful three times daily; she was some three weeks in taking what should have lasted her only one, at the end of which time she returned, saying she was growing smaller; but better than that, she had felt stronger than for three years past. At her request I ordered another bottle, which, after a quarter was taken, was accidentally broken. I ordered her another (half pound), which she took very irregularly, however, as I learned, some days taking one dose, and some days none. I have since ordered her a pound bottle from Parke, Davis & Co., which she has nearly taken. She has lost 35 lbs.; feels much stronger; says she can run, a thing she

has not done in five years before. Her appetite has increased; and the only unpleasant result is a moderate menorrhagia, which is increased or diminished with the medicine, being quite excessive when it is taken regularly. It also acted as a laxative to the bowels, which, however, was beneficial rather than otherwise.

SUMMARY. — Less than 2 lbs. taken; weight diminished 35 lbs; system greatly improved and toned up; slight menorrhagia, which was somewhat excessive when medicine was taken regularly; diminished when taken irregularly; slight laxative effect produced.

Grindelia Robusta.

By C. G. POLK, M. D., Phila., Pa.



RINDELIA, although a new-comer into the medical world, has already acquired a high place as a therapeutical agent. It is eminently a demulcent tonic, with expectorant properties. As a remedy in chronic catarrhal diseases of the respiratory apparatus, as also in asthma, but little need be added to what has already been said; but in the writer's experience, it has other provinces, almost as important. As a remedy administered by the mouth, the writer has found it of great worth in chronic catarrh of the uterus, bladder, and vagina. In combination with damiana, it forms an admirable remedy for these conditions. As a local application it has been found of great service. The writer has used it in the form of a strong decoction in leucorrhœa, with very desirable results. The decoction is made in the proportion of four ounces of the plant to each pint of water; if the plant be not available, the fluid extract may be employed in the proportion of one ounce of the fluid extract to three of hot water, and the injection employed while warm. It may often be used with lime water or infusion of chamomile flowers, or with both mixed in equal proportions. For acute gonorrhœa, this combination will be found to be vastly superior to the ordinary zinc and lead water injections. It seems to exert a peculiarly soothing influence upon mucous membranes, whether applied locally or through the stomach.

The writer believes that grindelia robusta is an agent of great importance in all diseases involving mucous membranes, and is destined to rank among the most valuable of the recent contributions to list of therapeutics. With yerba santa, the writer has found it of decided efficacy in pneumonic and tubercular phthisis; in chronic bronchitis the present esteem is just; in asthma its reputation is established.

It is but just to add that the medical profession is indebted to the enterprising house of Parke, Davis & Co., for its introduction east of the Rocky Mountains.

Ustilago Maidis.

By GEO. M. STEELE, M. D., Oshkosh, Wis.



USTILAGO maidis, or the ergot of corn, is now presented to the profession with the claim that it is equal to, and in some respects superior to the ergot of rye.

As to its effect upon the uterus, it is said to produce clonic contraction, instead of tonic, as does the ergot of rye, and therefore should this statement be true, it would more nearly simulate natural labor, should it be desirable to render aid to nature in that direction.

A fact of considerable interest in this connection is, that farmers in the corn-raising districts of Indi-

ana and Illinois have for many years noticed that cows aborted frequently when turned into cornfields, unless the smut was first destroyed. It is also claimed to be superior to the ergot of rye in passive uterine hemorrhages. I have had little personal experience with the remedy, but so far as I have used it, the results have been highly satisfactory.

In one case of extreme uterine hemorrhage, during and following the menstrual epoch, which had been a habit for years, and in which the ergot of rye, cannabis indica, gallic acid and nearly everything else had been used, with slight effects only, it has at the last two epochs rendered prompt relief with general systemic improvement.

At the Northern Insane Hospital the ustilago has been used in several cases in place of the ergot of rye, and with apparently equally satisfactory results; though the trial of it has not been sufficiently thorough to establish an exact place for it in the list of useful remedies.

The following cases have been kindly furnished me by Drs. Kempster and Goe:

CASE 1. McG., man, aged 38 years, was suffering from subacute mania. He was a dangerous, vicious man, and had attempted homicide before admission.

For several weeks his face, conjunctivæ hands and feet had been very much congested, and he was gradually growing worse, the congestion increasing. The ustilago was administered in $\frac{3}{4}$ j. doses, three times daily, and within ten days the congestion subsided, and the mental symptoms were relieved. Thus far there has been no recurrence.

CASE 2. P. C., man, aged 18 years, had been suffering from dementia of one year's duration, caused by exposure. He was suffering intense congestion of the head, face, eyes and extremities. Ustilago in $\frac{3}{4}$ j doses three times daily, relieved the congestion, and the mental symptoms cleared up within seven days.

CASE 3. M., man, aged 46 yrs., with acute mania, intense congestion of head, face, conjunctivæ; rapid movements, gesticulating constantly; speech incoherent, and was controlled by the delusion of wealth and power. Under $\frac{3}{4}$ j ustilago three times daily his symptoms abated within four days, and within ten days he was quite relieved.

CASE 4. C., man, aged 26 yrs., has been insane for ten years but latterly is much worse by reason of excitement. He had very marked cerebral symptoms, with paresis of vaso-motor system. His extremities were cold, face, eyes, etc., much congested.

Ustilago $\frac{3}{4}$ j three times daily, rapidly relieved the congestion, and the mental symptoms as rapidly abated. Formerly these congestions had come on once a week and produced the paroxysms of violence. Since this treatment was instituted there has been no recurrence of the paroxysms.

So far as it has been used at this hospital, it has relieved congestions apparently as well as the ergot of rye.

The cost of this remedy being about fifty per cent less than the ergot of rye, in connection with the claims of *value* that it presents, should at least stimulate us to ascertain its true value.

Ustilago Maidis.

By HEXT. M. PERRY, M. D., Phila., Penn.



THE fluid extract of ustilago maidis, I have used in three cases the past four weeks. The first case was that of the return of the menses six weeks after confinement—child living, and hearty. The flow was very profuse, but no pain.

I ordered ustilago in half teaspoonful doses every four hours, with the effect of *lessening the discharge to about normal*, when I ordered it to be taken three times a day only. The flow lasted five days; was not cut short, but brought from a flooding to a normal menstrual flow.

The second case was that of a Mrs. C., in labor. I had delivered, twenty-three months before, with forceps (child living), and twelve months before that had delivered her with forceps (child born dead).

In these two confinement her pains were regular, but very weak and short, and she was unable to deliver herself, and the fluid extract of ergot had no effect at all. Mrs. C.'s pains commenced Wednesday night, and on Thursday morning I was called in, made examination, and found os merely beginning to dilate. Gave instructions, and not hearing from her, I called again that evening; found upon examination very little change, and in fact there was no progress until Saturday evening, at 8 o'clock, when I found the os about half dilated, pains regular, but no force to them. I then gave her a teaspoonful of fluid ext. of ustilago, and sent for a doctor in consultation, thinking by the time he got there the second stage would have commenced, and if the forceps would be required we would not delay. I timed the effect of ustilago, and, in twelve minutes after it was taken, the pains became more frequent, but continuing regularly intermittent (without a doubt).

My friend, Dr. M., got there about 9 o'clock; I told him the previous history of the woman, and her present condition, etc.

He said, "Well, Dr., let us give some more of your new stuff." A teaspoonful we gave, and retired down-stairs to take a smoke.

The second stage had just commenced, os fully dilated, and the bag of waters being ruptured. We were quietly smoking and chatting, when we were suddenly summoned upstairs, and lo, and behold! the child's head was into the world. Another teaspoonful of ustilago, and the body was delivered; after-birth came forthwith. Mind you, the pains were regular and intermittent, and not a tonic contraction, as produced by ergot.

Case No. 3, one of post-partum hemorrhage, which came on from inertia, produced by extreme nervousness, shortly after delivery of after-birth.

The child and placenta were both delivered by nature. I then gave a teaspoonful of ustilago, and was sitting by the bed-side, when the patient said: "Doctor, I am flooding;" and flooding she was, and it continued to death's door. I used compression externally, titillating the os internally, and emptying the uterus.

Applied ice to the abdomen, and finally I gave ustilago hypodermically, a syringe full 30 minims, and not until then did the womb contract. The hypodermic produced the effect just in time, for the patient had then gone blind, and fainted, and was comatose. With good nursing, stimulants, etc., the patient is alive, and doing well.

After reading your journal, I made up my mind to try the fluid extract of ustilago, and have done so with very great satisfaction, and shall continue its use, and will let you hear from me again.

I was forced to use it hypodermically. It was not as an experiment, I assure you.

Ustilago Maidis in Dysmenorrhœa.

By D. OVERLY CRIST, M. D., Indianapolis, Ind.



THE following case may prove interesting as affording evidence of the usefulness of ustilago maidis in painful menstruation.

Was called to see Miss B., aged 19,

who was suffering great pain; found her face pale, the body covered with profuse perspiration, and very sick, she being a healthy-looking and well-nourished girl, but not of full habitude. Her mother informed me, with the exception of dysmenorrhœa, her health had always been good. Since menstruation commenced (three years since), she had suffered more or less at each period, but never so much as on the present occasion. She told me there was a slight "show" a short time before I was called, and knowing that *ustilago maidis* had a direct effect upon the vessels of the generative organs, I at once made up my mind to give her half drachm doses of fl. ext. *ustilago maidis* every half hour until relieved. Having directed them to quit giving after she became comfortable, I left my patient for the night. On returning next morning, found her very comfortable indeed, only having taken the second dose.

I then directed her to wait until two days before her next period; then commence and take drop doses every hour until the flow came on, which she did, and to her utter astonishment, they returned at proper time, free from pain or sickness, and she has not experienced any trouble since. It is not very hard to tell how it relieves; its direct action upon the uterine vessels, making the flow free, thereby relieving the distended and engorged vessels.

Rhododendron Maximum.

J. M. MULHOLAND, M. D., Tunkhannock, Pa.

DEER Tongue Laurel, or Great Laurel, grows on the sides of the Alleghany Mountains. This shrub grows 6 to 20 ft. high, with lance oblong leathery leaves, 4 to 10 inches long; narrowish below clammy pedicles and pale rose, or nearly white, corolla one inch broad; greenish in the throat on the upper side, more or less spotted with yellow and reddish flowers in mid-summer. I first commenced experimenting with *rhododendron* about one year ago, at first with poor results; at last, while attending an old lady who had the severest cough that I was ever called to prescribe for, I gave her;

R. *Rhododendron maximum*.
Saturated tinct. gttss. xx.
Aqua, $\frac{3}{4}$ iv.

a teaspoonful every hour; and called again in three days. As soon as I stepped in the house, the old lady said, "God bless you, doctor; you are the only doctor that ever done my cough any good this twenty years. I slept like a top." Her cough was tight and wheezing with stricture of the chest. I have used *rhododendron max.* for a great many obstinate coughs since, and it has given relief in most of the cases I have heard from. In fact, if I am called to a case now that has been treated with everything that other physicians could think of, I try *rhododendron*, and it always gives good results. I have recommended this remedy to several physicians, but have not had time to hear from them. My indications for using it are secretion of saliva scanty, a sweetish or mawkish odor about the breath, pulse open, tremulous. I have used it for cough where there was a scanty menstruation, and the patient was supposed to have phthisis. After using *rhododendron* for one week the cough stopped, and I have been asked for the remedy that cured this and that one, and in most cases, or at least as far as I have heard from those that have taken it, it gave good satisfaction, and my excuse for offering this remedy at this time (read before the National Eclectic Convention at Detroit. Ed.), instead of having it published in some medical journal, is that I could

bring it before the physicians in such a way as to make them try it, and if possible find out all of its indications. If it proves as valuable in other hands as it has in mine, I will think I have done at least some good by attending this meeting.

Black Haw—*Viburnum Prunifolium*.

By I. J. M. GOSS, M. D., Marietta, Ga.



IN the year 1860, my attention was called to the medical properties of *viburnum prunifolium*, by a short essay in some medical journal. In a short time I was called to a negress, who was in labor, at about the fourth month of gestation. I gave her $\frac{1}{4}$ gr. of morphia, and ordered a strong tea of the black haw to be taken in doses of 1 $\frac{3}{4}$ every hour; the pains in the back ceased. This arrested the labor at once. Case 2. In the year 1861, I was called to a young married lady, in the fifth month of gestation, in hard labor; the os dilated, and the fetus low down in the pelvis. The mother was much alarmed, but did not believe that anything could arrest the labor, but I told her I could arrest it. I gave a dose of morphia, which, for a short time lessened the contractions. I then gave a tea of black haw freely for a day or two, and the labor ceased, and at due time I delivered the young mother of a fine, healthy child. After this I was called in consultation with another physician, who had been giving a young married lady opium in large doses for several hours, for threatened abortion; but while she was perfectly narcotized, the labor was still very rapidly progressing. I proposed to give the fluid extract of *viburnum prunifolium*, but he said it would do no good, but I gave 1 $\frac{3}{4}$ at once, and repeated it in one hour, which arrested the labor, and the lady went her full term, and did well.

I could give many more similar cases. It is a specific for such cases.

Yerba Santa.

By J. A. STERRETT, M. D., Troy, O.



IHAVE been trying several new remedies, among them yerba santa claimed my attention. I gave it a thorough test in laryngeal and bronchial troubles, and found it to more than come up to my expectations. In chronic bronchitis, that is so frequently met with among old people, it works like a charm. Mr. K., aged sixty-five, who had suffered for two or three years with chronic bronchitis, came to me in January last, and said he had but little faith in medicines, as he had tried all the doctors in the country, but had not obtained any relief; it had become so annoying, however, that he could not rest at night, and that he would give me a trial. I put him on a combination of yerba santa and *grindelia robusta*. He was cured after taking three or four ounces of the preparation. Miss F., aged forty-five, who had been troubled with chronic bronchitis for two years, was cured after taking three ounces. I could give you quite a list treated with yerba santa successfully, but let this suffice. I have tried it in tuberculosis, and find that it will relieve the tickling sensation in the throat, that is so annoying to consumptives. Mr. C., who has been suffering with tuberculosis for the past six years, says, that he cannot find anything to relieve the cough as quickly as yerba santa. I use it in combination with glycerine or *grindelia robusta*.

I am giving a number of your new remedies a thorough test, and will inform you of the result. I notice in "Communications from Physicians," in NEW PREPARATIONS, that there exists quite a dif-

ference in their experience in the use of sulph. of cinchonidia. I used it in my infirmary practice for two or three months, and found it would answer every purpose that sulph. quinia would, but it always left the stomach in an irritated condition, and for that reason I have discontinued its use.

Thuja Occidentalis.

By D. W. S. VANCLEVE, M. D., Belleville, Ill.

I have been 28 days using the saturated alcoholic tincture of thuja on an old malignant scirrhus cancer, embracing the entire mammary gland of a large fleshy lady 64 years old. The cancer, extending from breast-bone to the armpit, measured $11\frac{1}{2}$ inches, by 6 inches. I had removed the cancerous mass, etc., from over the breast-bone and three ribs, for a space of 5 inches, but found masses of hair-like fibers imbedded in the bone, that all my endeavors failed to remove. I then applied thuja, which I was delighted to find had loosened the periosteum so it could be raised and clipped off, in 24 hours from first application. I continued its application, and gave it internally twice a day, and have up to this writing, with this result. 2d day I had the ribs for 3 inches, and across nearly the width of the breast-bone, bare and clean. 4th day found the 3d rib black, its thin edge and connection with the breast-bone completely detached. 5th day found the upper third of the sternum completely broken from the lower portion and sunk $\frac{1}{4}$ inch. At each expiration the serum within the chest sprayed out, the 3d rib rose and fell $\frac{1}{2}$ of an inch, rendering it impossible to use the silver plates, as I feared that this incessant working might slide them through this large opening into the cavity of the chest. Continued to use thuja, and sent electric currents along the ribs, and for 3 days applied the negative sponge, an inch in diameter to the naked investment of the lung. 8th and 10th day new osseous formation appearing along the ribs. 12th to 15th day rib and breast-bone fully united. From this time healthy granulations crept over the sternum and between the ribs, the osteal membrane forming over the repaired bones; and now, 28 days from first using thuja, I find the entire opening closed with clean healthy flesh. The patient is comfortable and not confined to the house.

I still use the other treatment required; using the thuja drops and wash twice a day.

Erythoxylon Coca.

By W. H. BENTLEY, M. D., LL. D., Valley Oak, Ky.

A FEW years since I procured six or eight pounds of the saturated tincture of erythoxylon coca from a druggist of Philadelphia, with a view of testing the virtues of the plant, therapeutically. I used all with the exception of a single bottle, within the course of about fifteen months. All the cases, but one, in which I prescribed it, were those of a chronic character affecting the lungs, and simulating phthisis. The excepted case was one of "nervous dyspepsia" complicated with uterine troubles and hysteria. The patient was married, the mother of two children, the youngest six months old, while the mother was herself 23 years of age. She was greatly emaciated, was very despondent, and was, withal, addicted to the opium habit. It was as a substitute for her accustomed morphine, the use of which I absolutely forbade, that I directed the coca, in drachm doses, three times a day. It answered the purpose admirably.

In short, the coca gave me entire satisfaction in all the cases in which I used it, acting promptly as

a nervous stimulant, allaying irritation, reviving the despondent without depressing reaction, and all without producing febrile or other unpleasant symptoms. My only objection was the high price, which was such as to prevent the druggists from ordering it, unless I would guarantee its sale.

I still had one pint on hand, which I used myself, recently, and the good results were so remarkable, and I noted its action so carefully, that I think a detail of the case may be both of interest and utility to your readers.

My age is 43; height 5 ft. 7 in., weight 125 lbs; complexion rather dark; hair thin, fine and dark; eyes dark, but neither hair or eyes black; the nervous temperament largely prevails; easily and unpleasantly affected by most stimulants and narcotics, and cannot bear opiates, even in medicinal doses, March 5th 1878 had a most severe and prostrating attack of continued fever, which came very near a fatal termination. The fever entirely subsided on the tenth day, leaving me greatly emaciated in body, and completely prostrated in strength. Convalescence was extremely tardy. My appetite returned slowly and digestion was quite good, yet there was not a corresponding return of strength. Alcoholic stimulants were used in moderation, and tonics, including both the mineral and the vegetable, very freely. All seemed to be of little service, for, at the end of three weeks, I had made but little progress in the accumulation of either flesh or strength. At this juncture, I resolved to try the *Erythoxylon Tincture*. I accordingly began with teaspoonful doses three times a day, taken with an ounce of water before meals. The salutary effects were perceptible with the second dose. My appetite rapidly increased, and, although in a few days I grew to partaking the heartiest meals of flesh, vegetables, and at dinner, desert in variety, I would suffer from violent hunger, long before the hour for the next regular meal. My digestion, which as a rule, is feeble, became, under the use of the drug, perfect, while assimilation was likewise complete, and the return of strength rapid.

To determine whether all was due to the medicine, I occasionally left it off a few days, when I soon could perceive that both appetite and digestion began to fail. Both always returned as above stated, with the resumption of the medicine.

On a few occasions, I experimented with large doses, or the ordinary doses repeated at short intervals, neither of which plans agreed with me. In either instance, if I pushed the drug, I became weak and tremulous, and several hours were required to wear off the unpleasant feelings.

A drachm dose, taken at any time, was followed immediately by a feeling of agreeable warmth in the stomach, which was soon succeeded by moderate stimulation, exhilarating mental activity, and filling me with the most pleasant emotions. These effects would last from three to four hours, and were never succeeded by depression or other ill consequences. If I took a dose an hour after meals, I was never hungry until three hours after. Taken when quite hungry, the appetite was appeased for about the same period. Taken without the water, its effects were not so rapid, nor at any time so well pronounced.

After using all, I experienced considerable desire for the medicine for three or four days, which occurred two or three times subsequently at intervals of some days.

At no time did I ever detect any change in the numbers either of my pulse or respirations. I shall hereafter give *Erythoxylon Coca* a thorough trial in "wasting diseases," tardy convalescence from acute maladies, and certain forms of dyspepsia, and carefully test it in the "opium habit."

Sulphate Cinchonidia.

By JOHN THOMPSON, Apothecary, Custar, O.



AM no physician, only a Fellowcraft of Pharmacy, as this is understood in the Kingdom of Prussia, and therefore avoid "counter-prescribing" as much as possible, but as this place is situated in the well-known "Black Swamp" of Ohio, renowned for its malaria, I am, during autumn and spring, when our fevers are in full blossom, often called upon for febrifuges, and when our physicians are all away from town, I cannot refuse to furnish them. Whilst doing this, the following case came to my notice, which might be interesting to physicians:

In one of our worst localities lived a man with a large family, a new-comer. Being afraid of our fevers, they used quinia sulphate as a prophylactic, and thereby made themselves "iron-clad" against it, so that when, in spite of the preventive, the fevers broke out amongst them, quinia sulphate only took effect in the most heroic doses, and then only for a few days. The man bought of me from November, 1876, to February, 1877, more than four ounces of quinia sulphate, and at the end of that period called for another half-dollar's worth of it. Thinking that he had spent money enough in this way, I proposed a change in tactics, to which he readily assented. I gave him one drachm of cinchonidia sulphate, to be given to adults in doses of five grains, three hours apart, to children in proportion. After a week he reported that those of his family who had taken the cinchonidia were all right; wanted another drachm for those whose turn it now was to have the "shakes." He got it, and shortly afterwards said that his family now were all well. I then gave him two ounces elixir aurantii comp. (pp. 90, 91, *Pharmac. Germ.*), in fourteen ounces port wine, to use as a tonic—dose, one tablespoonful twice a day, which they took for about a month. Some time thereafter he sold out and left this neighborhood. About a month ago he was here on a visit, and said that since they had taken the cinchonidia there had been no case of the shakes in his family.

If you deem this statement worth publishing, you are welcome to the use of it.

The Philadelphia Kepheline Compound.

By C. G. POLK, M. D., Philadelphia.



IT is rather unjust in you to include the glycerite of kephaline in the category of secret nostrums, or one concerning which there is or has been anything illegitimate, and yet you refer to it in your April issue as one, with which there, at least, had been unfair work.

Glycerite of kephaline is not a mere fancy name. Kephaline is the name by which the oxidizable phosphorous elements of the brain are now termed by Carpenter, Flint and Dalton.

Glycerite of kephaline is not a copyrighted nostrum.

Glycerite of kephaline is not a secret nostrum: every step in its manufacture was published in the *Druggists' Circular*, October, 1877, and there is no professional obstacle in the way of any one making it.

There is no more quackery in isolating phosphorous principles from brain, blood and wheat, than pepsin from the stomach, pancreatine from the pancreas, or a fluid extract from ergot.

Although several journals published my papers on the value of the isolated brain phosphorous compounds, none of them have complained of unfair treatment. Editors who wished to insert my papers as advertisements received no attention, while those who regarded and published my papers as legitimate information, without intimation of compensation, have not only received my own advertisements, but others through my influence. The "innocent victims" are those who demanded a stipulated price to publish my papers as legitimate matter, and their displeasure has been heightened by finding that the journals that brought isolated phosphorous compounds before the profession without demand of compensation are financially remembered by advertisements to the limit of my means.

The fact, however, should not be lost sight of, that all the recent attacks upon me were in the interest of a secret copyrighted nostrum "vitalized phosphates," "entered according to act of Congress, June 18, 1874, copyright secured in Europe; made according to Dr. Percy's formula in his prize essay." I need scarcely remind the intelligent reader that no such preparation is even hinted at in Dr. Percy's essay, no formula given, and what is more conclusive Dr. Percy asserts in this essay "that to the best of his knowledge isolated phosphorous compounds had never been used as a therapeutical agent (*Trans. Am. Med. Assoc.*, 1872, page 658), but he *supposes* on *hypothetical grounds* that they would prove valuable." Dr. Percy further claims that I embodied as my own conception the circular wrapper of his copyrighted nostrum. As the Circular Wrapper contains quotations on both the 12th and 15th pages from Dr. Polk, the untruthfulness of this statement is evident.

My paper, "Tabes Pulmonum," which the editor of the *American Journal of Medical Sciences* recollects having in his possession several years ago, and the manuscript of which the editor of the *Cincinnati Lancet* said "had the appearance of having been written at the time indicated by Dr. Polk" (*Cincinnati Lancet and Observer*, page 1093, November, 1877), being written in 1871, and covering the subject of phosphorous compounds isolated from brain, and corroborated by Dr. Wiley's paper in the *Louisville Medical News*, June 2, 1877, I think, places the fact beyond question that I introduced isolated phosphorous compounds into medical practice.

New Preparations.

OIL OF STAVESACRE IN SCABIES.—B. Squire recommends the use of the stavesacre, obtained by expression, as a colorless, odorless and unirritating remedy in the treatment of scabies.—*Southern Medical Record*.

RAPID EXPULSION OF TAPE-WORM.—Dr. Pauline in a communication to the *Allg. Med. Central-Zeitung*, No. 21, 1878, narrates a case in which the action of the anthelmintic was remarkably prompt.

One of his convict patients, having informed him that he was suffering from tape-worm, he immediately ordered the following: \mathcal{R} Flor. Kouso 3vj, Kameela 3iv. Half of this powder was taken immediately in water; this was at eight o'clock in the morning. At nine o'clock he took a dose of Carlsbad salts, and one hour later, the remaining half of the powder. No nausea or vomiting was produced. About half after eleven o'clock, free evacuation took place and in the stool was found a

coil of several tape-worms. Four heads of the *tænia solium* were discovered in addition to a large number of lengthy segments.

TAYUYA.—A number of papers have recently appeared in several of the Italian medical journals, laudatory of the effects of tayuya, in syphilis and allied diseases. Tayuya is the root of *dermophylla pendulina*, a Brazilian plant of the order *cucurbitaceæ*. Its physiological action is said to be an increase of the saliva and gastric juice, increase of appetite, improved digestion and slight laxation in small doses; in large doses it produces vomiting, colic, diarrhœa, sweating and increased salivation. Some suppose that in tayuya we possess a mild, agreeable and efficacious agent, which shall substitute mercury, possessing all its advantages without any of its disadvantages.

It is a proprietary preparation, and two alcoholic tinctures are at present made—*tra madre* and *tra diluta*. The former is used in gramme doses hypodermically, and diluted with water as a local application in the form of compresses. The weaker tincture (one part *tra madre* to three parts *spiritus rectif*), is given internally in doses of two to twenty drops, twice or thrice daily. [The value of this remedy in syphilis is questionable.—*Rep.*]—*Virginia Medical Monthly*.

TAYUYA AS A REMEDY FOR SYPHILIS.—Tayuya, a plant from Brazil has been highly recommended during the past few years as a remedy for syphilis and scrofula. It has been used chiefly by the Italian surgeons. All parts of the plant are used, but the most efficacious in syphilis is the root, either as a watery infusion or a tincture made by adding 1,000 grams of 80 per cent alcohol to 339 grams of the powdered root. The strong tincture thus obtained is to be diluted by the addition to it of 1,000 grams of rectified spirits. Of this, 14 drops is the maximum dose for an adult.

Ambrosoli, who has used it freely in the Maggiore and Sifilo-comio hospitals of Milan, reports favorably on its use in syphilis, and states that the skin affections, ulcerations and swellings of the glands are promptly relieved by it. Veladini reports "brilliant results," as do also Magri, Strambio,

Bazzoni and others. Gamba, however, in the Syphilitic Hospital for Women, in Turin, has not had such satisfactory results. Ziessl, of Vienna, states that he has seen no injurious results from tayuya, and, after giving it a fair trial, he greatly prefers it to mercury in the early stages of syphilis. He is not yet prepared to express a positive opinion as to its value in the later stages of the disease.—*Virginia Medical Monthly*, April, from *Allg. Wien. Med. Zeitung*, No. 3, 1878.

CHAULMOOGRA OIL (OLEUM GYNOCARDIÆ).—Chaulmoogra oil is a remedy which has been employed for centuries by the natives of India in the cure of leprosy and other forms of skin disease. It is a fixed oil procured by expression from the seeds of the *gynocardia odorata*, which are now official in the Indian Pharmacopœia (*Gynocardia semina*). Mr. R. C. Lepage, late of Calcutta, has collected in pamphlet form all that is known regarding both the plant and the oil. The use of the latter was first brought under the notice of the profession in 1854 by Dr. Mouat, of the Bengal Medical Service, who had employed it with considerable success in a few cases of leprosy, scrofula, and constitutional syphilis. But though others have found the remedy of service in these and allied affections, its more general employment has been retarded by the persistent adulteration of the oil by the natives of India. Dr. Dymock of Bombay, however, has recently discovered means for detecting its adulteration, so that it is believed it can now be procured in a state of purity, and it is expected that the remedy will be found of real service in the above mentioned diseases, and others of a similar nature. The dose of the oil, which is somewhat unpleasant in flavor and smell, is from five to six drops gradually increased. It is best given after meals, and may be taken in milk, glycerine, or cod-liver oil. The seeds, coarsely powdered, may be given in the form of pills of five or six grains. In skin diseases the oil should also be applied externally, or the unguentum gynocardiæ (I. P.), which is prepared by beating the seeds to a paste along with simple ointment.—*Medical Times and Gazette*, April 6, 1878.

Correspondence.

Grindelia Robusta. In regard to *grindelia robusta*, permit me to say that I have prescribed it to some extent as a neurotic tonic in nervous asthma, or similar conditions of the capillary bronchial tubes, owing perhaps to the want of a normal functional activity of the inhibitory nerves presiding over the muscular structure of these minute tubes.

These cases, in my view particularly, are greatly benefited by the *grindelia robusta*, given in drachm doses of the fluid ext. once in 6 hours, continued, perhaps, for several days.

It is not infrequent that many of our best therapeutical agents fall into unmerited disrespect because the cases in which they are exhibited do not require or are not adapted to their powers.

Perhaps we are all prone to forget that "medicines are not positive, but relative agents."

D. C. HOLLEY, M. D.

VERNON, June 15th, 1878.

Your NEW PREPARATIONS came duly to hand. Many thanks. I am exceedingly well pleased with it. It is just what the profession needed. Inclosed find stamps for a

year's subscription; would like the first number forwarded. I am sorry that I have not learned of it before, and will certainly interest other physicians in it.

I have tried several of the new remedies. In fact, was one of the first to use *eucalyptus globulus*. Have used it in connection with sulph. cinchonidia, in malarial fevers; also when indicated in typhoid; have also used it with marked success in uterine diseases, as an injection, and in nasal catarrh for a douche.

Would inquire which of the new remedies you have found most successful in allaying the nervous irritability of children, where it is not desirable to continue opiates. Again accept thanks for journal.

H. J. HILTON, M. D.

ANN ARBOR.

Will our readers please note the inquiry of Dr. Hilton, and reply through NEW PREPARATIONS? [ED.]

I have been very greatly pleased with NEW PREPARATIONS, Vol. I, No. 4.

Have had the opportunity of using bladder-wrack for obesity. My patient, a female, and

mother of three children, became exceedingly fat; was affected with irregular pulsations, and dyspnoea. Used a good heart-regulator, and active antibilious medicine, without success. Was very greatly relieved by taking $\frac{3}{4}$ viij bladder-wrack in ext. fl.

Will you please send me NEW PREPARATIONS for 1877, bound in paper? also make me a subscriber for the present year. I like the matter of fact description of the therapeutic powers of new articles, as expressed in your work.

The October number is full of sense, and gives as much scientific information as any other 32 pages of matter with which I am acquainted; with "rhetoric" sufficient to give it a very novel, as well as truthful character.

Shall doubtless avail myself, in my practice, with many of your very important productions.

JAMES V. TABOR, M. D.

WASHINGTON CO., JACKSON BROOK, Me.

Sulphate of Quinia. For nearly two years I have been using the sulphate of quinia as a substitute for the sulphate of quina. Having no malaria here, I cannot testify to its efficacy in those cases, but as a tonic and febrifuge I believe quinia to be superior to quina. It has not the disagreeable, bitter taste so often complained of by patients as being peculiar to the latter, while I have given it in much larger doses than quina could possibly be given, without producing its constitutional effects. As a tonic I prescribe it in all cases in which quina seems to be indicated, in doses ranging from half a grain to five grains. I once gave 48 grains of the sulphate of quinia to a boy four years of age, with no other effect than a reduction of the temperature from 105° to 100° in eighteen hours. I am now using cinchonidia, but cannot speak definitely yet of its virtues.

Grindelia Robusta. In a case of asthma occurring in a girl of six years, I prescribed the fluid extract of grindelia robusta in ten drop doses every three hours. It relieved the paroxysm to such an extent that the mother omitted it after the little patient became easy, "so as to save it for the next time." After three months, the paroxysms are less severe and less frequent than formerly.

Bicarbonate of Soda. A short time since I had an opportunity of testing the bicarbonate of soda, as recommended by Dr. Waters, for removing the pain from burns and scalds. A boy of ten years fell into a pile of burning shavings. His face was burned so the skin came off one side. I covered the face with common saleratus over which I laid a wet cloth. In five minutes the pain was all gone. He received no other treatment, and soon recovered completely.

[We have several times found common laundry, or toilet soap, when saleratus (soda bi-carb.) was not at hand, equally efficacious. It is the alkali action that is needed. ED.]

Guarana. Last winter I reported several successful experiments with guarana as a remedy in sick headache. Since then I have seen a case in which it produced no effect whatever. I then gave an ipecacuanha emetic which I followed with a half drachm dose of chloroform, producing a natural and quiet sleep, from which the patient awoke refreshed and free from pain.

JOHN C. STEWART, A. M., M. D.

YORK, Me., June 4th, 1878.

Jaborandi. I tested jaborandi for the first time a few weeks since, in a case of hereditary dropsy and gout, in which the feet, ankles, right knee and right hand were enormously large, œdematous (water oozing freely from the pores at the feet). I used an infusion of:

R. *Fl. Ex Jaborandi*, $\frac{3}{4}$ j.
Aquæ Bullentis Oj.

Mix and cover up until cool, dose two tablespoonfuls morning and night, on empty stomach, abstaining at the same time from drinking during the effect of the drug. The effect was wonderful; profuse flow of saliva, and perspiration. I asked the patient how the remedy had worked. His answer was, "My! how it made the sap run." In one week the parts were reduced to normal size. No distress of any kind was experienced in the fourteen doses exhibited. Your fluid extract I think is just the thing, reliable and handy, and is by far more uniform in its therapeutical effects than the dried plant, which must be constantly undergoing changes in the drying process and losing *more or less* of its properties, besides not being as uniform as your fluid extract.

WM. ARMSTRONG, M. D.

PROVIDENCE, LUZERNE CO., PENN'A.

Cascara Sagrado. I have tried Parke, Davis & Co.'s fluid extract of cascara sagrado in a very marked case of dyspepsia and constipation. In this case there was a deficiency of secretory power in the liver and glands of the alimentary canal, indicated by constipation, scant, dry stools, flatulency, and indigestion. I gave 40 drops of the above fluid extract twice a day, and the first day it produced two or three soft, bilious stools, with increased appetite, and improved digestion. In a few days the patient was relieved of the constipation and the dyspeptic symptoms. I have not found any remedy that acts so promptly. It at once arouses all the secretions. It has the most direct power over the liver of anything I have ever used. It is the remedy par excellence in constipation, if given in small doses, say 30 to 40 drops; if given in large doses, it will purge, and is rather inclined to gripe, but it operates mildly as an aperient in small repeated doses.

I am of the opinion that it increases the action of the pancreas and gastric glands, as well as that of the liver. There is nothing that more powerfully improves the digestive power than small doses of the cascara sagrado. Dr. Bun'ly has conferred an inestimable blessing upon the profession, and the sick, by introducing this, as well as some other new remedies. Yours truly, I. J. M. GOSS, M.D.

MARIETTA, Ga.

Damiana. I wish to give you my testimonial in regard to the drug turnera aphrodisiaca. A gentleman, Mr. S., æt. 29, applied to me for treatment for atrophy of the right testicle, a few years ago. He suffered severely from orchitis in that testicle. He noticed that, after the inflammation passed off, it began shrinking, and very sensitive. When I examined it, it was soft and small. I put him fluid ext. damiana some five weeks ago, one teaspoonful three times daily. The testicle has nearly resumed its former size, and sensitiveness all gone. "Richard is himself again."

M. D. C. M. SUMMERTON, M. D.

SUNHILL, Washington Co., Ga., April 17, 1878.

Coca. I have tried coca on my own person; get stronger flows of artery, more nerve power, more appetite. Since having typhoid fever last fall, and dropsy of the heart as

sequel, the heart has been irregular in action, feeble in pulsation, and very painful. Coca calms, strengthens, steadies. It is a cardiac tonic through brain and cardiac nerve.

I get no nerve excitement; it does not *hallucinate worth a cent*. It may be owing to the conditions under which I took it (48 hours almost entirely without sleep), and then it proved an excitant to great wakefulness; 30 to 45 drop doses; acts better since becoming rested; the calm is more from sense of confidence. More anon.

R. L. KING, M. D.

EENTON, Mich., June 10, 1878.

Sulph. Cinchonidia.
Salicylic Acid.
Phosphide of Zinc.

Since I have been taking your journal I have been greatly benefited by the information received from it. I would not be without it

under any consideration.

I have used sulph. cinchonidia largely in my practice, and as a tonic, and antimalarial remedy; it has *never* failed me yet. I prefer it to quinia for the reason that it is so much cheaper, and my patients take it so much better.

I have tried salicylic acid in several cases of acute articular rheumatism, with very great success, especially in a case not long ago, a Mrs. P., to whom I gave the following:

R. *Acid salicy.*, 3 ij.

Spr. eth. nit., 3 ss.

Syr. Simp. Q. s. ft., 3 ij.

M. S. Teaspoonful every six hours.

In three days she was entirely relieved.

Have used phosphide of zinc pills, in one case of hysteria with success; have no doubt but that they will *always* prove beneficial in that class of diseases.

A. MACKEY, M. D.

BEACON, Iowa, May 26, 1878.

Ustilago Maidis.
Yerba Santa.
Grindelia Robusta.

The fluid ext. ustilago maidis has given better satisfaction than any preparation of ergot I have ever used. It is intermittent in its action,

and often continuing, with gradually diminishing force, from four to six hours after delivery in primipara cases. Yerba santa I have used, with grindelia robusta in asthma, with irritation of the bronchial mucous membranes, with good success. One, a young man, æt. 25, has often, for seven or eight years, been confined to the house for two or three weeks at a time, unable to pursue any out-door employment. Commenced taking the above in September last; has not had an attack since; thinks himself cured.

Miss R., æt 17, subject to severe attacks of asthma, with cough and bronchial irritation; has spent winters South by the advice of physicians; supposed to be unable to endure the sudden changes of our northern climate. Commenced taking yerba santa and grindelia robusta in October last; attended school during the winter, without an attack, and is apparently cured.

The above are only two of many cases, should others realize equal success.

NEW PREPARATIONS has conferred a great boon to suffering humanity.

W. G. ELLIOTT, M. D.

PONTIAC, Mich., June 10, 1878.

Grindelia Squarrosa.

The sample of grindelia squarrosa received from you was all that could be expected of one remedy. I gave it to four patients having malarial trouble in the chronic form, with

congestion of the liver and enlargement of the spleen; with excellent results. In connection with the former trouble, one patient was subject to an attack of sick headache every two weeks. With the use of grindelia squarrosa, 3 j; glycerine, 3 ij; teaspoonful four hours apart, she has recovered entirely from ague and sick headache.

J. A. INGLES, M. D.

MOREA, CRAWFORD CO., Ills., July 3, 1878.

I wish, through your journal of **Yerba Santa**. NEW PREPARATIONS, to report an inveterate case of chronic Bright's disease of the kidneys of eight years' duration. Any one wishing to communicate with the case can address Thos. Warren, at White Rock, Kan., the man who has been treated and cured with

R. *Yerba santa*, 3 ij.

Glycerine, 3 ij.

Syr. of wild cherry, 3 j.

M. S.—One dessert spoonful three times a day.

Took the prescription three months, and reported himself as cured, and I think he is, for I never saw such a marked change in any one resulting from treatment as there is in this case.

J. J. SCOTT, M. D.

WHITE ROCK, Kansas.

I had a case of natural **Ustilago Maidis**. labor, but tedious, occupying nearly two days (46 hours). Mrs. M. C., age 30, primipara, placenta retained nearly one hour, with considerable hemorrhage. I administered 10 drops fluid extract ustilago maidis, and in 15 minutes the placenta was expelled. I then repeated the ustilago, five drops, it acted like a charm; that was on the 2d of the present month. Patient doing well. I have used the same medicine before in two cases, with same good results. I formerly used ergot, but will do so no more. More anon.

Respectfully yours,

J. P. SIDDALL, M. D.

INDIANAPOLIS, Ind., April 8, 1878.

I have used your fluid extract of **Damiana**. damiana in three cases of debility of the generative organs; one very bad case of spermatorrhœa, which two one-pound bottles cured. This was an extreme case, where the nervous system was very much prostrated. It was the only remedy I used.

Most respectfully yours,

C. ALONZO WILSON, M. D.

WOLCOTTVILLE, Ind., March 23, 1878.

My patient weighed 240 **Fucus Vesiculosus.** pounds when she commenced to take this remedy—about four weeks ago—and now weighs eight pounds less, and feels better than she has in ten years.

She expressed great confidence in the remedy, and will anxiously wait for some more. When she commenced this remedy she was increasing in weight so fast that she became apprehensive of apoplexy. She at first had no confidence in the remedy, and it was with the utmost reluctance that she consented to test it.

The damiana gives complete satisfaction in all the cases that I have tested it in. Have not tried

it fully, but am pleased with it so far. Will report after a few more tests.

Respectfully yours,

C. S. MAYNARD, M. D.

PAW PAW, Mich., March 22, 1878.

Yours received, desiring a **Cactus Grandiflorus** detailed statement of my case in regard to the action of the cactus grand. About 18 years since I was taken with intermittent pulse from the toxic effect of taking too large doses of Fowler's solution, but on leaving off the medicine it ceased and has not troubled me since, until last summer. I indulged in smoking some cigars, and not being in the habit of smoking it produced intermittent pulse again, and this time more incorrigible. I tried verat, virid., gelsemin., digitalis, etc., to no avail, until your circular brought to my notice the cactus grand. I procured some from Morrisson, Plummer & Co., of this city, and have been taking gtt. iv five or six times a day for the last two months. It has acted admirably. I have been gradually improving in every respect; brain, heart, kidneys and organs generally, until I feel as well as I ever did, and my pulse has become normal again, and I think permanently so. I am now prescribing it for a case almost similar to mine, only longer standing. Will report.

Yours very truly,

J. T. WRIGHT, M. D.

CHICAGO, April 10, 1878. 394 Park ave.

Since writing you last I have tested **Yerba Santa** in functional derangements of the kidneys and urinary apparatus in acute and chronic forms, and I find it very efficacious in bringing about a healthy action in all the excretory functions of the animal economy. Hence we might say that yerba santa is an alterative, especially adapted to all abnormal conditions of the secretions and excretions from almost any cause.

A few days since was called to see a young man who had kidney disease for about six weeks; had been treated four weeks by a homeopath, and as he was no better he applied to me. I gave him one-fourth fluid dram four times a day, and in four days was "all right," as he expressed it.

I think it is more potent than any other diuretic with which I am acquainted. I am now testing cascara sagrado in two obstinate cases of habitual constipation, one of which is complicated with dyspepsia. Will report in the near future.

Truly yours,

GEO. W. MALLORY, M. D.

LOWELL, Mich., March 23, 1878.

I have never used any kind of treatment that has acted so grandly, if I may use the term, as cascara sagrado has in my practice. I have prescribed the same in over a half dozen cases of obstinate constipation with the best of success, restoring a healthy action in every case.

Yours truly,

C. C. DELLENBAUGH, M. D.

PORTLAND, July 3, 1878.



NEW PREPARATIONS.

GEO. S. DAVIS

AND

C. HENRI LEONARD, A. M., M. D.,
Editors.

DETROIT, MICH., JULY 15TH, 1878.

GEO. S. DAVIS, Publisher.

Caution.



VARIETY of the berberis, known vulgarly as the Oregon grape plant, has been shipped to the eastern market by parties in California as the true *berberis aquifolium*. The Oregon grape is a distinct variety of the berberis family, designated as the *Vancouveria*, and possesses quite different properties. The practice of placing on the market false varieties of new plants is one to be greatly deprecated, as liable to cause a loss of confidence in new drugs by their failure to produce expected results. Physicians should exert every effort to secure the true drug from responsible dealers.

Pilocarpine, or Pilocarpia.



IN reply to several queries from our correspondents relative to this alkaloid, we will state that at present writing the price is so high as to practically drive it from the market. It is prepared from the Brazilian drug jaborandi, which may be satisfactorily used as a substitute in the form of the fluid extract.

We extract from an article on this subject by Dr. Squibb, in the *N. Y. Med. Journal*:

"The active principle has been isolated, and is an alkaloid. It is called pilocarpine, properly, pilocarpia. It is a viscous or semi-solid, unmanageable substance, slightly soluble in water, and freely soluble in chloroform, ether and alcohol. Its salts with organic acids are uncrystallizable, but with nitric, sulphuric and hydrochloric acids are crystallizable, and soluble in water in almost any proportion. The hydrochlorate and the nitrate are in common use. These are sold at the same price by the importers (thirty-five to forty cents a grain), but the hydrochlorate is the more efficient, as the relative amount of acid in the two salts is as thirty-six to fifty-four, the difference being made up by the base, which alone is active."

Married.



AT Saginaw City, on the evening of the 10th inst., our former classmate, Prof. Charles H. Stowell, M. D., of the Physiological Laboratory of the University of Michigan, to Miss Louisa M. Reed, M. S., of the School of Pharmacy, University of Michigan. With the physiological and microscopical researches of Dr. Stowell our readers are all familiar. Miss Reed is not less widely known in pharmacal circles for her microscopical work in

this department, and in botany. Recently she has been engaged in a series of finely illustrated articles in *New Remedies*, upon the "detection of adulterations by means of the microscope." She is also engaged as microscopist in the projected "Woodruff scientific expedition around the world." We wish them both joy and prosperity, "unsophisticated" and "unadulterated," and in macroscopical measures, in their new sphere.

Red Blood Corpuscle.



OUR editorial claiming Dr. Stowell to be the *first* to demonstrate the nucleus in the red blood corpuscle does great injustice to Prof. Freer, of Chicago, now deceased. Prof. Freer demonstrated the red blood corpuscle nucleus to the writer in 1868, having discovered the nucleus a year prior. Prof. Freer exsiccated the cells, and the nucleus was plainly visible under reflected light on these carefully dried blood cells. Dr. Freer demonstrated these cells to German professors at Berlin, Munich, etc. But since the professor came from America (?) no attention was paid him. Dr. Wm. C. Hunt, of this city, as well as the entire faculty of Rush Medical College, and many other M. D.'s throughout the country, can substantiate this. I take this liberty in addressing you, as Prof. Freer is no longer amongst us to speak for himself.

Yours in truth,

DR. JULIUS HOFFMAN.

By addressing Dr. Wm. C. Hunt, Dearborn avenue, near Chicago avenue, or Dr. F. Wadsworth, 229 Ontario, Chicago, Ill. (his former assistants), you might ascertain when Dr. Freer first published his discovery. I *saw* the nucleus myself in 1868, and mentioned the fact to Prof. Koellicker, in Wuerzburg, Germany, in 1869, and to Prof. Stricker, of Vienna, in 1871.

REPLY.

We have written to the references Dr. Hoffman has given us for further confirmation in this matter, but can get no answer. However, Prof. Stowell never made the claim that he was the first to demonstrate the nucleus; he *was* the first, however, to demonstrate it, by satisfactory methods, in this country we fully believe. We know there has been a supposed nucleus seen at various times, but it was always found to be due to some error in the glass, or in the mal-action of the reagents used, or else in the "eye" of the ambitious manipulator. The very method given by our correspondent above, that of examining *dried* corpuscles, is ripe with chances for fallacious deductions. In the first place we cannot understand how "reflected light" can be handled so as to use, even so low a power as a one-eighth objective. It is well-known that lenses to work satisfactorily upon the nucleus of the red blood corpuscles (and the nucleolus which it has, as Prof. Stowell has recently demonstrated), are of necessity "immersion" lenses, where no reflected light is possible from the very nature of things. We doubt very much if the red corpuscle itself could be seen by reflected light *at all*. It is one of the smallest objects that we, as histological microscopists, have to handle, and

our best and finest glasses are needed to work it up satisfactorily.

Furthermore, dried cells, so far as we are acquainted with them, are *very* unsatisfactory to handle; the light bothers too much by being refracted, etc., to make such very desirable specimens. And as to dried blood cells, any one at all acquainted with their microscopic characters can well understand how irregular is their appearance, and how liable any one would be to draw erroneous opinions from a microscopic examination of them. Histologists usually prefer specimens in a *normal* state, and their ingenuity is taxed to the utmost to invent preservative fluids, so as to keep specimens in such a condition. Prof. Freer, it seems then, regarded this of no moment. We think, that had this been believed to be what Prof. Freer supposed he demonstrated (as he showed his cells to so many professors and eminent men in histology and microscopy in America and Europe), we would not have had to have waited ten years longer for the demonstration of the actual nucleus of the red blood-corpuscle. We are not a "professional" microscopist, still we have handled the tube almost daily for a great many years in investigating the many normal and abnormal microscopical cells of the *corpus humanum*, and from what we know of the nature of the red blood-cell we should hate fearfully to rest our diagnosis of a nucleus in the same, from the appearance of an exsiccated specimen. It was undoubtedly this, and not because Professor Freer was an American, that led the German histologists to slight his claims as a red blood-corpuscle—nucleus—discoverer. His Chicago confreres undoubtedly hesitated to believe it for the same reason, and not because he was an American, with themselves.

That Case of Psoriasis.

AS there has been some little questioning of the authenticity of this case, reported in our April issue, of the wonderful effects of berberis aquifolium, we took the liberty to ask for a brief statement from the patient, Mr. Hall. This is what he writes us:

SIR—I think that I am in duty bound to bear testimony to the virtues of berberis aquifolium, having received almost miraculous benefits from it in psoriasis. I have been troubled for the past six or seven years, and believe there could not be found in Michigan a finer developed specimen than mine, being completely covered from head to foot with those charming incrustations.

The only ill effect that I felt was my inability to work at my trade as a machinist. It never was irritable, but the fact of its being there almost drove me crazy. I went to England, and attended the Royal Hospital for Skin Diseases about three months. The chief thing administered was Fowler's Solution, and in about six months got better. Was well for about one year, when again it made its appearance in a worse form, and I was induced to try berberis aquifolium. I had an 8-ounce bottle, and at the outset I experienced a

tingling sensation of the skin, which lasted for some time, and then found the exfoliation gradually getting less and less. After taking the berberis about six weeks in teaspoonful doses four times a day, it ceased to form, and the red discoloration gradually disappeared. There is only one obstinate patch about the size of a 2-cent piece on my knee, but that does not form any scales, and gives me no inconvenience. If you think proper you can publish this statement. I can produce half a dozen medical gentlemen that saw me before taking the berberis, and I was indeed a picture of misery. I never deviated from my regular course of diet, and cannot ascribe the cure to anything else but berberis.

S. HALL.

DETROIT.

Annual Meeting of Association of Medical Editors.

THE fifth annual meeting of medical editors was held on Monday evening, June 3, at the Tift House, Buffalo.

There were present the following medical gentlemen, representing the several journals mentioned:

Dr. John P. Gray, the president, in the chair, representing the *American Journal of Insanity*, and Dr. F. H. Davis, of the *Chicago Medical Examiner*, the recording secretary. Besides these gentlemen, there were present the following: William Brodie, editor *Michigan Medical News*; Theophilus Parvin, editor *American Practitioner*; C. Henri Leonard, editor *NEW PREPARATIONS*; J. J. Mulheron, editor *Michigan Medical News*; E. S. Dunster, editor *Michigan Medical News*; Leartus Connor, editor *Detroit Lancet*; N. S. Davis, ex-editor *Chicago Medical Examiner*; F. H. Davis, ex-editor *Chicago Medical Examiner*; Thomas F. Rumbold, editor *St. Louis Medical and Surgical Journal*; J. F. Miner, E. N. Brush and W. W. Miner, editors *Buffalo Medical and Surgical Journal*; R. O. Cowling, editor *Louisville Medical News*. Representatives from many of the other journals did not arrive in time to take part in the meeting.

In the future we would suggest the propriety of holding the session of medical editors at a considerably later period in the days of the meeting of the American Medical Association than this was held, so as to give an opportunity for more journal representatives to take part in the proceedings.

The president read an address upon the Laws Governing Insanity in England and America. Though a little *mal à propos* for the occasion, it was a very instructive paper. Discussion of it was elicited from Drs. N. S. Davis, of Chicago; Wm. Brodie, of Detroit; Foster Pratt, of Kalamazoo, and J. P. White, of Buffalo.

Drs. E. S. Dunster, of Ann Arbor, and E. N. Brush, of Buffalo, were appointed a committee to nominate officers for the ensuing year. The following names were presented by the committee, and were duly elected by the association.

President, William Brodie, Detroit; vice-president, Julius F. Miner, Buffalo; secretary, F. H. Davis, Chicago.

After the election of the officers, the meeting was adjourned until the Monday evening preceding the next meeting of the American Medical Association, which will be held at Atlanta, Georgia.

Book Reviews.

FIFTY-SEVENTH ANNUAL REPORT OF THE NEW YORK EYE AND EAR INFIRMARY, FOR THE YEAR 1877.

From the report we learn there have been 7,211 eye cases, 2,679 ear cases, and 640 nose and throat cases therein treated during the past year. Average daily attendance at all the clinics, 108. The report also contained a somewhat detailed account of 90 cataract extractions made by the ophthalmic staff during the two years ending December 31, 1877. Of these, 64 per cent are graded "perfect successes." This report is especially interesting to our ophthalmological readers, but we have no room to quote farther. The institution is the largest in the United States, and numbers among its surgeons some of the leading "specialists" of New York city.

FIRST ANNUAL REPORT OF THE EYE AND EAR DEPARTMENT OF ST. MARY'S HOSPITAL, AND ST. MARY'S FREE EYE AND EAR INFIRMARY, FOR THE YEAR ENDING JUNE 1, 1878.

From it we learn there have been 94 ear cases and 396 eye cases treated. Cataract is marked with 15 cases; iridectomy, 30; enucleation, 13. This is certainly a good showing, so far as "work" performed is concerned, for the initial year of any similar institution. Surgeon, Eugene Smith; Assistant Surgeon, C. J. Lundy.

EULOGY UPON LUNSFORD P. YANDELL, M. D., by Theodore S. Bell, M. D., Louisville. Reprint from *American Practitioner*, April, 1878.

This is an able address upon the scientific attainments and moral virtues of this late distinguished man.

THE BRAIN: A JOURNAL OF NEUROLOGY. Edited by J. C. Bucknill, M. D., J. Crichton-Browne, M. D., D. Ferrier, M. D., and J. Hughlings-Jackson, M. D.

This is a new illustrated quarterly of 142 octavo pages each number, issued by MacMillan & Co., of New York city, at \$4 per year. The purport of *The Brain* is, as its editors announce, "to keep its readers well abreast of modern progress in neurology, and to advance the knowledge of a class of diseases respecting which, it is universally admitted, there is yet much to be learnt." From the men at the head of the journal as editors, and the body of contributors announced (which embraces the leading brain-workers interested in this special department of *brain-ology* in America, France and Germany, and other countries of Europe), we doubt not that this most excellent organ of—man (we were about to use the editorial "ours," but modesty forbade us, lest the *St. Louis Clinical Record* might take sad offense to anything of the kind, as it seems to go mad over any allusion, no matter how remote, to a *kephalínè* article or "*organ*"), will be thoroughly and scientifically considered. To our hosts of readers, and especially the extra *Hazardous* (no lunacy or brain-aberration intimated) acephalic *St. Louis Clinical Record*, we especially commend this new venture of medical journalism. (Parenthetically: as our *St. Louis* contemporary seems to run all to stomach—pardon us, chicken gizzard or ingluvin—we presume, at the end of the year, he would much prefer to have re(a)d *Hare* on that organ. However, *chacun à son goût*.)

NEW MEDICINES: A Monthly Journal of Progressive Medicine and Pharmacy, published at Atlanta, Georgia.

This is another of the new-comers into this cold and almost inhuman journalistic world of ours. It is edited by Ferdinand King, M. D., and L. G. Alexander, M. D., and sent for \$1 per year. It has early fallen into bad ways, even as its motto indicates—*non multa, sed multum*—not of *many things* yet, but *much*, as regards the patent-right "*iodia*." We hope it will see the error of its ways and reform, for it is too newsy a journal to be thus prostituted. Its articles are usually short, and to the point.

OLD AGE: ITS DISEASES AND ITS HYGIENE. By the late Lunsford P. Vandell, M. D. Reprint from the *American Practitioner*, of February, 1878.

In a note by Prof. Parvin, the editor of *The Practitioner*, at the end of the pamphlet, we are informed that "just as the form containing this most interesting paper was going to press, the message of the death of its author was received. A peculiar interest, therefore, attaches to these, the last words to the profession of one of its noblest and most illustrious members." In a note accompanying the MSS., Dr. Parvin adds, the author remarked: "This probably is the last of my contributions to medical journalism." This, alas, was only a too true prophecy. The last line he ever wrote was in regard to this article, writing his son, asking "to see the proof of my article on Old —," here his hand faltered, and the remainder of the sentence was illegible.

CONTRIBUTIONS TO OPERATIVE SURGERY AND SURGICAL PATHOLOGY. By J. M. Carnochan, M. D., formerly Professor of Surgery in the New York Medical College, Surgeon-in-Chief of State Emigrants' Hospital, etc. Illustrations drawn from nature. New York: Harper & Bros. Large 4to. 1877, 1878.

Parts I and II combined contain 64 pp. of letter-press and two full-paged lithographs; price \$1. It treats of elephantiasis arabum of lower extremity successfully treated by ligature of the femoral, with history of other cases; of the head and face and neck successfully treated by ligature of *both* common carotids. Also contains essays upon ligature of the femoral for secondary hæmorrhages following thigh amputations, and from wounds of plantar and tibial arteries.

Part III has 58 pages of letter-press and two full-paged lithographs. It treats of the amputation of the inferior maxilla, with several successful cases, and the time for operating in extensive injuries, followed by shock and collapse.

These "contributions" by this learned and eminent surgeon are to be issued to the number of ten, to complete the set, the above being fair specimens of what the remaining seven are to be. Any one interested specially in surgery can ill afford to be without this series of *practical* monographs, for this is virtually what the series will be, upon most of the capital operations in this special field. The publishers are doing their share in a worthy presentation of the work, and the illustrious surgeon, you can be well assured, has and will do his.

CINCINNATI LANCET AND CLINIC.—This excellent weekly is formed by the combination of the former *Lancet and Observer* and *Clinic*. It is an excellent journal, each number containing 16 large octavo pages. Terms, \$3.50 per year, *in advance*. Drs. J. C. Culbertson and J. G. Hyndman are its editors.

ANNUAL ANNOUNCEMENT OF THE DEPARTMENT OF MEDICINE AND SURGERY OF THE UNIVERSITY OF MICHIGAN FOR 1878-9.

Within the past year this institution has extended its course of study to *nine* months, thereby securing, it is hoped, a more thorough training of its graduates. A graded three-year course has also been established, and it is earnestly recommended that all matriculants avail themselves of the benefit of the graded course. Examinations will be held on September 28th and 30th for admission; this will be in writing upon Arithmetic, History, Geography, Forms of Government, etc.

A special course of lectures in microscopical work is to be given by Prof. Stowell at the Physiological Laboratory.

At a meeting of the Board of Regents held June 25, 1878, a recommendation made by the "Committee on the Medical Department" was adopted. Said recommendation provides for the appointment annually, by the Board, of two homœopathic physicians of the State, who jointly with the Faculty of the Homœopathic College shall "have sole charge of all examinations in said Homœopathic College."

From this it will be seen that none of the Professors of the Faculty of the Department of Medicine and Surgery are any longer required to examine any student of the Homœopathic College, or to make any statement, or to afford any evidence of any kind to be used toward their graduation in homœopathy, or for any other purpose, or to take cognizance in any way of students in exclusive or sectarian medicine.

Catalogues and information can be obtained by

writing to the dean, Prof. A. B. Palmer, M. D., Ann Arbor, Mich.

SIXTH ANNUAL REPORT OF THE BIRTHS, MARRIAGES AND DEATHS IN THE STATE OF MICHIGAN, FOR THE YEAR 1877. By *Henry B. Baker*, M. D., Supt. of Vital Statistics, Lansing, 1872.

From it we learn there were 43,950 births in 1872, or about five per hour; 24,475 being males, and 19,475 females. August was the most prolific month, September being next. January was the least prolific of all. The number of marriages recorded was 9,882, or a little more than one per hour. December seems to be the month that Cupid oftenest surrendered his arrows to Hymen's torch, as we should naturally infer from the fact that the Goddess of Maternity delighted most to hold her receptions and levees in the starry nights of August and September. The deaths were 21,071, August and September being the months of greatest mortality, lung and bowel diseases being the most frequent on the list; the former for adults, the latter for children; the greatest scourge was "consumption."

A COMPLETE COMPEND OF THE PRINCIPLES AND PRACTICE OF MEDICINE. By *S. H. Potter*, M. D.

In this the author seeks to give the essentials of the eclectic practice of medicine in monthly installments, aiming to complete the whole during the year. Parts 1 to 6 inclusive are now out. Price for the whole, \$2. Published by Jacob H. Long, Hamilton, Ohio.

Clippings.

DAMIANA IN DISEASES OF THE GENITO-URINARY ORGANS.—Says the learned Gross, "Reduced sexual power, from whatever cause it may arise, is one of the most distressing of maladies, and is therefore entitled to the deepest sympathy and consideration on the part of the honest practitioner, by whom unfortunately it is rarely discussed."

Dr. Gross also says from the intimate connection which exists between the urethra, the prostate gland, the seminal vesicles, ejaculatory and the differential ducts, and the tubes, it is not surprising that lesions of that passage should exert a powerful effect upon the functions of generation, whether that effect be due to the extension of morbid action through continuity of structure, or to reflex action. Hence it is that many persons affected with urethral disorders suffer from more or less marked disturbance in their sexual power, amounting in some instances to impotence, or inability to copulate, either from inability of introcession or premature ejaculation, both states being associated with imperfect or transient erections. In many cases dependent upon stricture, inflammation, hyperæsthesia of the posterior portion of the urethra.

CASE I.—T. W., a young gentleman of wealth and somewhat "roue," called at my office Sept. 25th, the very picture of health, aged about 30; complains of a failure in his effort at copulation, owing to a partial loss of erectile effort. On examination I found the history of excessive venery only. The sound exploration failed to discover either stricture or tenderness of the urethral tract. All other functions being normal. I advised him simple rest for a couple of weeks. After due trial he returned reporting treatment so far a failure.

I then placed him upon the fluid extract damiana, tablespoonful doses, well diluted, to be taken morning and evening, together with a generous diet, and a respite from all genital exercise. After ten days of such treatment he reported himself fully rehabilitated and fully potent.

CASE II, Sept. 2d.—A gentleman of middle life, aged in the fifties, Mr. D., calls concerning an indescribable pain or sensation about the head, with a loss of power and desire for sexual connection; attributed it to great and continued trouble in his business relations. On examination I failed to find any lesions of the genito-urinary organs or functional disturbance of his alimentary canal. Indeed, he seemed in all respects a fair specimen of health, with the two exceptions named. I ordered him free use of damiana, and occasionally, when the pain in the head was severe, application of the constant current of electricity to the nape of his neck, down the spinal column. His treatment was continued several weeks with very fair results, though his business troubles were still on his mind.

CASE III.—W. E. J., aged 24, called Dec. 10th, apparently in good health, but complaining of inability to perform the sexual act. I failed to discover any lesion of the urethral tract, or any other trouble about his person, except that his virile organ was small and flabby. He reports good erections when abed and alone, but utter failure of this effort when in company with a female about to copulate. I deemed this a case of genital demoralization, and placed him under the most advanced treatment for the same, with electricity, rest, moral suasion, cold baths, etc., and the very best fluid extract damiana, fully as to quality and time, but all in vain.

CASE IV.—R. J., aged 54, called Aug. 2d, complaining of a gradual loss of health, weight, and genital power. Here, too, we failed to discover any lesions of the genital organs. His seemed to be a case of general atrophy from debilitated digestion and assimilation of several years standing, which yielded kindly to local and general Faradization, after a few months' treatment. But his genital organs were still weak and impotent; thereupon we placed him on liberal doses fluid extract of damiana, which acted like a charm after a few weeks' administration. The first effects were to cause two full mushy stools per day, accompanied by an increasing appetite, and finally a restoration of his lost sexual power.

CASE V.—Mr. J. H., aged 25, called Jan. 2d, suffering loss of copulative power. Upon an examination of the urethral tract, the sound was arrested by two strictures at the prostatic portion of the urethra. The neck of the bladder was found irritable with excessive mucal discharge. The strictures were gradually dilated by the appropriate instruments for that use. The bladder washed daily with a double silver catheter, using as a wash a weak solution of atropine. Internally administered gelseminum with the bromide of sodium. This was continued until the acute symptoms had subsided, when damiana was administered. The sound passed daily, through which a constant current of electricity was passed from the sacrum to the end of the sound. In all this treatment lasted about one year. Since then the young gentleman has married and finds himself fully able to do family duty.

SPERMATORRHŒA.—Says Tanner, spermatorrhœa is a deranged state of mental and bodily health, due to too frequent escape of seminal fluid. Masturbation is the most common cause.

Symptoms.—There may be only a separate escape of seminal fluid; or this may be associated with morbid changes in the vesicular seminales, ejaculatory ducts, bulbous portion of urethra, and prostate gland. Urine sometimes rendered slightly albuminous by seminal fluid.

CASE I.—S. T., of N. C., aged 45 years, called June 12th, suffering from frequent loss of the seminal fluid, due, as he said, to grief and sad reverses of fortune. The penis was small and flabby. Otherwise there was no lesion that could be found. His symptoms were as follows: General debility, with some emaciation. Also much nervous irritability. Complained of dullness of vision and of poor memory. Bowels constipated and flatulent, with occasional attacks of giddiness, headache, and palpitation. In his case I suspected excessive venery, as he informed me that he had lately been in the habit of keeping a mistress who was greatly amative.

The treatment of his case was rest, a change of scene, nourishing diet, as the hygienic measures. Medically, large doses of the fluid damiana, which was continued through the months of June and July, with the best of results, for his seminal losses ceased, he grew fleshy in body and better contented mentally.

A few weeks subsequently he came to the city for the treatment of general rheumatic and neuralgic pains, which yielded kindly to quinine and electricity. He had been visiting a malarial district. His old trouble (spermatorrhœa) had entirely disappeared.

The characteristics of damiana (viz., alterative effects on the alimentary canal, and the tonic effects upon the urino-genital organs) were decidedly manifested in his experience with this drug. It will be well at this juncture to call the attention of the

profession to the remarkable and beneficial action of this new drug (damiana) in the various unhealthy or irregular discharges of the genito-urino organs, in the female as well as the male. Several of my medical brethren have strongly testified in its favor in the treatment of sterility, where the uterus and its appendages seemed to suffer simply from inertia. I have found it an excellent remedy in cases of amenorrhœa, dysmenorrhœa and leucorrhœa.

CASE II.—Mrs. B., aged 28, called April 6th, suffering from amenorrhœa. Had been married several years without issue; as a consequence was unhappy and anxious. Complained of excessive leucorrhœa, though apparently she was robust and healthy. Cheeks rosy, still she complained of nervous irritability, and had a dreamy and absent kind of manner.

Hygienic Treatment.—Moderate mental and bodily work, cheerful society, to avoid heavy meals, to sleep on a hard mattress and alone during treatment.

Medically ordered the use of fluid extract of damiana, teaspoonful doses, in milk, three or four times a day; to omit tea and coffee and other stimulants; to drink freely of milk or buttermilk. After pursuing this treatment two months all her symptoms improved, became perfectly regular in her menses, became pregnant at fourth month, and was delivered at the end of regular time of a healthy boy.

CASE III.—Mr. D. H., aged 24, called Jan. 7th, suffering from spermatorrhœa. He complained of loss of seminal fluid, night and day, and particularly after he had passed his water or fœces. He attributed it solely to masturbation, and from his general appearance I judged he was correct. He, too, suffered from general weakness, nervous irritability, with a dreamy, absent kind of manner. Flatulence and constipation. Dullness of sight, and perhaps of hearing, weakness of memory, attacks of palpitation, giddiness, headache, and neuralgia. He would keep his bed a week or two at a time, and frequently go days without eating or speaking a word to anyone. This condition had existed for a year or more, when his father, fearful that the young man was about to lose his mind (judging from his eccentricities, and from many odd and unusual ways), called my attention to his case, when I obtained the above history.

Hygienic Treatment.—I placed him under the best hygienic influence, and required him to make daily calls at my office, when I used moral suasion and encouragement, endeavored to instill better ideas, more manly thoughts and actions, to imbue him with brighter hopes for the future; also instructed his family to put themselves to greater efforts to make home attractive, cheerful and pleasant to him. (Happy home influences surrounding youth, is a matter worthy of our most earnest solicitude, attention and study, and were it more generally inculcated throughout our land, how many young and gallant wrecks might be saved upon the ocean of every-day life.)

Medically I relied upon our old and tried friend, the different preparations of damiana, with entire success. Though in his case it required better than a year of skillful management to complete the restoration mentally and physically.

As to the combination with milk I may casually say that all the preparations containing gum and rosin solutions, are more agreeably taken, and more readily assimilated, when held in suspension in milk. I also would note that I have found all the bromide salts to be more ready of use and to give better results when held in solution in milk.

CHRONIC PROSTATIC DISCHARGE—CASE IV.—Mr. K., aged 26, called on February 2d, suffering from chronic prostatitis and continued loss of prostatic fluid, dripping away from the head of his penis upon his underwear. History of the case was that this trouble originated from a long neglected gonorrhea, and frequent exposures to cold and unhealthy locations. His symptoms were pain and tenderness about the perineum, with a sense of heat and frequent efforts at passing water. He had pain on defecation; feeling of weight about the perineum and rectum; experienced pain when passing the catheter.

Treatment.—Perfect rest in bed; warm baths; used belladonna to perineum; bromide in solution of milk as injections per rectum; simple nourishment without stimulus; all this until the acute stage had passed. Then I placed him upon damiana as an alternative and tonic, which treatment was maintained for several months, or indeed until all his unhappy symptoms had disappeared.

In conclusion I will state that these are but a few of the typical cases of chronic urino-genital diseases that have come under my observation during the past year or more, where I have given this new remedy, damiana (*turnera aphrodisiaca*), a full and fair trial, with results more satisfactory than any other course that I have tried or had knowledge of in an extended experience in these troubles, and I would most cordially solicit my medical brethren to give it (the genuine article) fully and freely in such cases as are named above, and report their experience for the benefit of the profession at large.—*Dr. Caldwell in St. Louis Medical and Surgical Journal.*

NOTE ON SOME OF THE THERAPEUTIC VIRTUES OF EUCALYPTUS GLOBULUS.—Rather more than a year ago my attention was first drawn to this remedy by an interesting reference to it in Sir John Rose Cormack's *Clinical Studies*. In a postscript to a case of cauliflower excrescence of the uterus, he mentions that latterly he has used, as an injection, an infusion of the leaves of the *eucalyptus*, or a mixture of from one to four drachms of a tincture in eight ounces of tepid water. Besides being refreshing and comforting to patients so affected, these applications have, in his experience, a remarkable power of destroying the fœtid odor of morbid discharges, *without the substitution of another unpleasant smell*. He extends the remark, after much experience, to the offensive discharges attendant upon cases of ozœna, cancer of the tongue and throat, cancer of the uterus, gangrene, and other affections accompanied by fœtor. In the same postscript he mentions that in simple uterine catarrh he knows of no remedy equal in value to the *eucalyptus globulus*. In these cases he has met with the most satisfactory results, when it was simultaneously administered by the stomach and in the form of injection. He adds: "As Gubler has shown, the anti-catarrhal virtues of *eucalyptus* are most remarkable. With increasing experience of its power, I more and more use it in bronchial, vesical, and uterine catarrh, in gonorrhœa and in gleet." These representations of Sir John Rose Cormack, and the circumstance, which he also mentions, that a preparation of the essential oil in capsules is a favorite prescription with many leading physicians in Paris, led me to make trial of the remedy in a variety of cases during the past year. The only preparation which I have used has been the tincture prepared by several of our most eminent chemists in Edinburgh, and I have seldom prescribed more than a teaspoonful, mixed with a wineglassful of water, twice a day. In several

cases of bronchitis with profuse expectoration, I have witnessed remarkable benefits after a very brief use of the remedy, evinced by a rapid diminution of the discharge, and also by a corresponding improvement in the general condition of the patient. But my object in writing this note is to recommend the internal use of *eucalyptus* in a class of cases to which, as far as I know, it has not hitherto been considered applicable. . . . It occurred to me that owing to its valuable properties as a disinfectant, deodorant, and astringent, it might prove useful in certain forms of disease in the stomach and bowels. . . . A gentleman of seventy-five had suffered from formidable disease of the stomach for eight or ten years, and on several occasions, had seemed very near his end, with every symptom of malignant ulceration. Great quantities of blood had been vomited from time to time, and at short intervals, seldom exceeding a fortnight, the stomach after becoming painfully distended with a sour *barmy* fluid, was relieved by repeated vomiting, while life itself seemed possible only with extreme lightness of diet and most vigorous self-denial. . . . He has taken the tincture of *eucalyptus* twice daily for many months, and during all that time has scarcely had even a threatening of those painful and exhausting attacks which had latterly occurred almost every week.

Another old gentleman, a retired medical man of eminence, who for some years has labored under symptoms which indicate disease of the stomach and possibly the colon, is so sensible of benefit from the use of the medicine, that he can seldom abandon it for even a few days without being reminded of its importance and eagerly resuming it.

Another case in which ulceration, or some other organic disease of the stomach, seemed the only reasonable diagnosis, the patient made an unexpected recovery from extreme attenuation and weakness under similar treatment.

I have tried it repeatedly in a class of cases which are usually regarded as ulcers of the stomach threatening perforation, and with complete success. . . . Of course, no one will think of using the medicine as a *specific* in any case where it may seem to be indicated. All the details as to diet and general regimen, which would be deemed necessary without it, must be carefully attended to. In conclusion, I may say, that it seemed to me of manifest use lately in a case of diphtheria commencing in the gullet and ascending to the fauces; and my belief is that it might be prescribed with advantage in some cases of typhoid fever.—*Edinburgh Medical Journal.*

EUCALYPTUS AS A DISINFECTANT, ANTISEPTIC AND EPIDEMIC REMEDY.—I propose giving you a little of my experience in the use of *eucalyptus*. About the last of August, 1875, I had a case of intermittent fever which quinine did not touch, from the fact that it would not stay in the stomach so long as while it was going down, even at the intervals between the sweating stage and chill. I suppose you will say that I did not prepare the stomach for the quinine. The *eucalyptus* prepared the stomach by antidoting the poison that produced the trouble, and the case was cured in three days—no more chills after the first fifteen drops of *eucalyptus* were administered. It proved to be the only remedy the stomach would recognize as *the* tool which nature or the vital force required to work with in the case, and the beauty of it in such cases is, you can give it with all certainty without regard to stage, or, as the old folks used to say, "idiosyncrasy." You can call it antiperiodical in this case, or what you please. I only pretend to

say, it was the specific antidote or remedy for the case.

CASE 2.—“Facial neuralgia.” Lady, aged 55, bilious and sanguine temperament; had been troubled by spells for several years. All the usual remedies failed to even afford relief. From its periodic character I tried eucalyptus. (I should have said that the patient possessed an erysipelatos diathesis.) From the first fifteen-drop dose I could see an amendment, and in twenty-four hours the neuralgia was gone; and at the usual time for it to return this fall, it did not put in an appearance. There were slight symptoms, but two or three doses of eucalyptus were sufficient to set all right again.

CASE 3.—*As an Antiseptic and Disinfectant.* Having a case of retained placenta at the fourth month, and not being called in until the odor in the room became almost unbearable, I removed what I could of the putrid placenta, and ordered vaginal enemas of tepid water, adding a little castile soap, and used on my hands carbolic and salicylic acid, without much effect. I then tried eucalyptus, which was at once the sufficient disinfectant. I at once returned and ordered the vaginal enemas changed to eucalyptus put in alcohol equal parts, adding a teaspoonful to one-half pint or a pint of tepid water, and use at once, the enemas being repeated every three hours. Suffice it to say, the next day when I called there was no putrescency about the room or bed, although there were pieces of the placenta passed at several different times after the eucalyptus was commenced, and the patient made a good recovery.

CASE 4.—Lady, aged 58. General erysipelas, with putrid dysenteric passages. Case pronounced hopeless by others. I gave a dose of eucalyptus (15 drops), followed by veratrum gtt. vii, water oz. iv, a teaspoonful to be given every half hour until a moisture appeared on the skin. The passages spoken of occurring every few minutes before taking the eucalyptus, did not occur but once after the first fifteen drops in twelve hours, and no more putrescency. After the first dose I prepared fluid extract eucalyptus dr. iij, water oz. iv. Dose, a teaspoonful alternately with the veratrum. The patient made a good recovery.

CASE 5.—Child aged 8 years. Diphtheria. Found the child's mouth black as ink; diphtheria coating as thick as one-half the length of the uvula; pulse asthenic, and breath very putrid. This was the only child left in the family, and I considered the responsibility, the parents being willing to risk a change of doctors. I made a gargle of tincture baptisia dr. j, eucalyptus dr. iss, water oz. iv, to be used, a teaspoonful as a gargle every hour, and one-half teaspoonful taken alternately with the gargling. Also tinc. veratrum gtt. v, aconite gtt. vii, water oz. iv. M. S. One teaspoonful every hour. Sharp vinegar applied to throat externally. Was to call again next day, but must confess I did not care about getting quite there until I heard the child was alive, and to my astonishment I found the mouth and throat as clean and natural in color as I could wish; tonsils somewhat swollen, but of natural color; pulse full and normal. Result, a good recovery.—*A. M. Woodward, M. D., in Southern Medical Record.*

MORE ABOUT EUCALYPTUS.—An every-day use of the above article develops more and more its superior claims as one of the best, if not the best “antiseptic remedy” now known; and herein lies its power as a febrifuge, aided by the moderate “diaphoretic” property which it possesses.

Its effect in all grades of diphtheria is suddenly pronounced, in changing the fœtor of the breath,

or the septic condition of the blood and other fluids of the system, *on which depends the severity of the disease*, and should be the first remedy given in this scourge of our country, and followed up until the system is thoroughly cleansed of every vestige of the “virus,” used both as a gargle for the throat and posterior nares, and as an internal remedy. For gargle,

℞ *Fl. Eucalyptus*, 3 ij.
Aq. Fontana, 3 iv.

Use q. s. every half hour or hour.

Internally, ℥i., aq. for ℥iv. Dose, 1 teaspoonful every hour.

Of course, other remedies are necessary to fulfill different indications, as there are no two cases which require the same treatment, save the eucalyptus, and as I am not writing an article on diphtheria, I shall not give them here.

In typhoid and malarial fevers, “eucalyptus glob.” is an indispensable remedy. A case I recently attended of the worst malignant-type will show its power in counteracting the fermentation or putrescent condition in such cases.

When I entered the room where the patient lay, the putrid scent was unbearable, and the friends summoned to witness the final separation. Patient unable to utter an audible sound. I at once commenced the use of eucalyptus, and in twelve hours you could perceive no putrid scent whatever, and with other appropriate remedies the patient recovered.

In putrid dysentery—child three years old—changed in six hours to healthy passages, and with aconite, grs. v, aq. ½ goblet, and teaspoonful given every hour, the child was about the house in two days. When called, the child was comatose, and passages principally putrid blood.

In scarlatina, it has the same salutary effect. Three cases in one family recently treated by my partner, Dr. J. M. Mulholand, were changed from a malignant to a simple type in two days. From a putrid concentration to the throat to a healthy scarlet eruption on the whole surface.

As has been noticed in other articles; its effect in unhealthy ulcers, as a wash and to administer internally, is well marked.

We are now using it in case of gun-shot wound of knee-joint, with the most favorable results, keeping down inflammation and producing a favorable termination. It acted like a charm and recovered without inflammation and but *very little* supuration.

I would add that in the cases treated by my partner, of scarlatina, there were no other remedies used except aconite and belladonna, in very minute doses.

℞ *Tr. Aconite*, *Tr. Belladonna*, aa. gtt. iii.
Aqua one tumbler full.

S. 1 teaspoonful every hour.

℞ *Eucalyptus (Fl. Ext.)*, gtt. xv.
Aqua, one-half tumbler.

Used alternately in teaspoonful doses, and for gargle.

I would also add that we have had a very large number of cases of both diphtheria and scarlet fever within the past year, but of scarlatina we have lost none, diphtheria two, and those commenced in the lungs, filling the large bronchial tubes and trachea.

It is one of our best remedies in the type of fever which prevails, this fall, called by some typho-malarial.—*A. B. Woodward, M. D., in Medical and Surgical Journal.*

BERBERIS AQUIFOLIUM.—Since my arrival here my attention has been called to some remarkable remedies. The berberis aquifolium was brought to my notice here by an old Indian, who had used it

for a long time in scrofulous, cancerous and syphilitic affections. The root is the part used, and this is extremely hard and tough; of a bright, yellow color, and pungently bitter to the taste. Its bitter or tonic properties are very much superior to gentian or hydrastin, even equal to quinine—some regard it more effective in malarial fevers. Its power as an alterative is certainly very efficient, for it seems to be capable of eradicating scrofulous, cancerous and syphilitic contaminations from the blood.

The action of this invaluable drug on the economy of man is really astonishing; a *cathartic, diuretic, diaphoretic, tonic and alterative*. On the liver, it quickly relieves congestion, and seems to increase the activity of the spleen, as is evinced by a rapid elaboration of red blood. As a stimulant to all glands it is invaluable, as in chronic tonsillitis, and enlargement of the prostate. It is, however, in secondary and tertiary syphilis that its most wonderful action is exhibited. Here, in a simple decoction, with no iodide of potass., nor any other drug, does this drug so efficiently act upon the glands as to eliminate all the morbid material and reconstruct, as it were, a new bony tissue.—*Dr. Hastings, Los Angeles, Cal., in Eclectic Medical Journal.*

YERBA SANTA.—This plant grows abundantly in Mexico and California. The natives have long esteemed it as endowed with rare value in all diseases of the respiratory apparatus. They claim that the worst case of consumption can be cured by a tea made of this plant. While such an estimate is at variance with medical experience, there seems to be no doubt but that it is the greatest remedial agent yet employed in chronic bronchitis, pneumonia, phthisis, chronic gastric catarrh, in hemorrhoids, and in chronic derangement of the kidneys. It blends astringent, demulcent, tonic, sedative and balsamic properties; the latter seems to depend upon a resinous principle in which it is exceedingly rich. This resinous property exerts upon the mucous surface a decidedly soothing and alterative effect. Under its use the cough is soon mitigated, the expectoration becomes less abundant, the appetite improves, the food is better digested and assimilated, the flesh and strength is regained, and frequently cases which have not been benefited by previous treatment, are rapidly restored to health. Its value in hemorrhoids is also positive, especially in the internal variety. I have cured two cases with it that had defied all other treatment, and recommend it with great confidence in this disease.—*Dr. Euripides Jones, in Eclectic Medical Journal.*

CASES OF BRONCHOCELE SUCCESSFULLY TREATED WITH FUCUS VESICULOSUS.—The case which first suggested to me the use of fucus vesiculosus was that of a lady, who stated that up to four years previous her health had been rather good, but about that time the catamenia became irregular, and was attended with great pain on each periodic return. She assigned as the cause of the thyroid tumor, great distress of mind and disappointments. When I saw her the disease was of six months' duration; the right lobe of the thyroid gland was fully as large as a turkey's egg, extending latterly so as to press on the right carotid and jugular vein. A strong pulsation was felt in the tumor, and a purring thrill was communicated to the hand. She had no palpitation of the heart. The action of the heart is quiet and regular. She complained of headache, and a buzzing noise in the right ear. She imagined there was an enlargement of the right eye, and that she felt a sensation of

fullness in it. The tumor at times impeded her deglutition, and occasionally her breathing also. I attended her from time to time for a year and a half; during that period I gave her everything, I believe, that is recommended for this disease. In addition, by my advice, she resided at the sea-side, and used sea bathing; still the tumor continued undiminished. About this time I ceased to attend her. Three months ago, however, she presented herself again. She told me she got relief for some time from her more distressing symptoms, but the tumor never reduced in size. Latterly, all the old symptoms returned in an aggravated degree; the tumor was larger than at first, and the left lobe was now nearly as much enlarged as the right. The difficulty of swallowing was increased; pulse quick and small, ranging from 100 to 120. I prescribed fucus vesiculosus, in the dose of the sixteenth of a grain three times a day. At the end of a fortnight the improvement was great, the headache was completely relieved, the bowels became quite regular, and the right lobe of the thyroid had shrunk considerably. She continued to take the fucus vesiculosus for some time longer, when the gland had almost assumed its natural size. She has now no disagreeable symptom and the general health is greatly improved. This lady is now married for two years. She is about thirty years of age.

The second case occurred in a housemaid, about thirty-five years of age. When I saw her the disease had lasted for twelve months, and the thyroid gland had acquired a great size, both lobes being equally enlarged. There was a very distinct fremitus all over the tumor. She complained of great palpitation of the heart; pulse 130; great prominence of the eyes; catamenia irregular; tongue large and flabby; of a whitish pale color, and covered with a yellow fur in center; bowels constipated, only acting about once a week. She stated that about eight years ago she was in a situation where she was very hard worked, and in consequence her health began to decline, and the menses disappeared for two years. Somewhere about this time she perceived the swelling in her neck, which soon acquired a very formidable size. Four months after the bronchocele began, palpitation of the heart set in; this was succeeded shortly by the prominence of the eyes. This case baffled and resisted all treatment. Iodine, internally and externally, iron, zinc, digitalis, and biniodide of mercury, proved ineffectual. She was subject occasionally for the last year and a half to paroxysms of violent palpitation of the heart. I gave her the fucus vesiculosus. When she was ten days taking this medicine a great flow of the menstrual discharge came on, lasted a few days, and returned in a week. She persevered in taking the medicine. Soon after the gland began to shrink, and is now so much reduced that one would scarcely imagine, if they were not told so, that it was ever diseased. The prominence of the eyes is less; she is quite aware of this herself. She is now able to close the lids without any effort on her part; this she could not do before any reduction took place in the gland.

The third case is that of a young lady of fifteen years of age. She states that the swelling in her neck began about three years ago, shortly after the death of her only brother, to whom she was very much attached; that it gradually increased, but was not of any inconvenience to her more than the deformity that it produced. Both lobes were enlarged, the right more so than the left. There was no fremitus in it; the general circulation was quiet, except that the heart became excited on making the least exertion. She had a dry, husky

cough, attended with a ringing sound, a pallid look, not the greenish yellow of chlorosis, but the blanched appearance that is seen in cases of hemorrhage. Notwithstanding all this she was not emaciated, but, on the contrary, quite plump. The appetite was quite good, the catamenia regular, but scanty in quantity; bowels sluggish, never moved except by medicine. I gave her the fucus vesiculosus, and the result was very satisfactory. In the course of ten days the improvement was great, the bowels became regular, the headache left her, and the languid and prostrate state had completely disappeared as the gland began to shrink. She is progressing most satisfactorily; the gland is now become quite soft, but it has not the shrunken appearance or contracted feel of the two other cases yet, but I am hopeful that it will ultimately become reduced to its natural dimensions.—*Dr. Harcourt, Va., in Eclectic Medical Journal.*

PICRATE AMMONIUM IN WHOOPING-COUGH.—*Dr. H. C. Wood*—*Dear Sir*:—I write you to say that I believe I have succeeded in using a specific for whooping-cough.

Believing that whooping-cough is the result of the location of a specific contagium on, or in, the mucous membrane of the respiratory apparatus, from my experience with the muriate and carbonate of ammonia I was of the opinion that the beneficial results obtained by their use in the treatment of bronchitis could be ascribed to a stimulant effect on the respiratory mucous membrane; as the ammonia is eliminated from the system through this membrane. In looking over the list of antizymotics I rejected all the familiar preparations as most likely useless, or they would have been found useful long since. I concluded that to subserve the purpose indicated I must have an antizymotic that would be eliminated by the respiratory mucous membrane, and the only thing likely to answer the purpose would be the picrate or carbazotate of ammonia.

I have treated six children suffering with whooping-cough (at the Howard Dispensary) in accordance with the above related conclusions, and, I am very happy to state, with the most gratifying results. The mothers assured me that after their children would take two or three doses of the medicine the paroxysm would relax in severity, and in a couple of days would entirely subside as a paroxysmal cough with the well-known whoop, and a simple cough of ordinary laryngo-bronchitis remain. I gave the remedy in this way:

℞ *Picrate of ammonia*, 1 grain.
Muriate of ammonia, 24 grains.
Powdered extract of liquorice, 1 drachm.
Water, 3 ounces.

M. S. Teaspoonful every three hours to a child six months and under, doubling the quantity for a child of about one year to two years of age, and giving as much as one-eighth grain to a child three to five years of age.

It might be a coincidence that these six children (belonging to three different families) recovered under the use of the medicine; but I, of course, believe it to be solely the result of the picrate of ammonia. My opportunity for observing whooping-cough in private practice is very limited. Knowing that you are specially interested in therapeutics, I would like you to submit the treatment I have suggested to a test, provided it impresses you favorably.

I have requested several of my friends in the profession to give it a trial. So far as I know, the treatment of whooping-cough heretofore has been quite discouraging, especially to parents, and I am very sure there would be no harm done or time lost

by the treatment with picrate of ammonia.—*Z. T. Dellenbaugh, M. D., in Medical Times.*

ÆNOTHERA BIENNIS IN MUCOUS INFLAMMATIONS.—*Ænothëra biennis*, or evening primrose, which is indigenous to nearly all parts of the United States, possesses valuable properties as a mild sedative and alterative in many diseased conditions of mucous surfaces, especially the gastric, intestinal, and vesical.

It is useful in some forms of dyspepsia, particularly those accompanied by an irritable state of the stomach and of the bladder, as indicated by frequent vomiting and micturition. Having prescribed the remedy for eight years. I have been able to carefully note its effects, and am convinced it will be an important addition to our list of medicines.

Dr. N. S. Davis, of Chicago, has recently found valuable results from this remedy (*Quarterly Abstract of Medical Science*, February, 1877). He says: "From my own clinical observations I am inclined to regard it as a mild but efficient sedative to nervous sensibility, acting more especially on the pneumogastric nerve."

Its chief value, I believe, will be found in typhoid fever, to the treatment of which it is peculiarly adapted by its soothing action upon the intestinal mucous surface. I am convinced that it essentially modifies the inflammatory condition which precedes ulceration of Peyer's patches, and that its use may frequently prevent ulceration. The usual dose in typhoid fever is from fifteen to thirty drops every three hours. There is no danger of an overdose, and I have known a tablespoonful of the fluid extract to be given every two hours, by mistake, till two ounces had been taken. In that case it seemed to revive the patient, after the manner of a stimulant, and I am not sure that it might not be advantageously given in large doses in some cases. The fluid extract of *ænothëra* is not incompatible in mixtures with any other medicine. Its flavor resembles that of cold tea, and it is acceptable to any condition of the stomach. It appears to be well worthy the attention of the profession, and the writer would be pleased to learn the results of its use in the hands of other practitioners.—*JAS. F. SULLIVAN, M. D., in Pacific Med. and Surg. Journal.*

CHRONIC SPLENITIS SUCCESSFULLY TREATED WITH THE POLYMNIA UVEDALIA.—The success attending the treatment of malarial diseases, especially where the spleen is involved, sometimes exceeds the comprehension of some of the most learned in the medical profession. A case recently treated with the bears-foot, I thought would prove interesting to the readers of the *Reporter*. Some three weeks ago I was consulted by Newton M., aged twenty-five, who complained of pain in the region and over the seat of the spleen, and upon examination, I found tenderness, with marked enlargement of the organ. Upon questioning him, he gave a history of a series of attacks of intermittent fever about a year previous to consulting me. Thinking this would be a good case to test the merits of the bears-foot, I accordingly prepared an ointment, after the following formula:

℞ *Fl. ext. polymnia uvedalia*, 3 ij.
Adeps, 3 j. M.,

and directed that it should be applied twice daily. I also gave, as an internal medicine—

℞ *Wine of pepsin*, 3 ij.
Mur. acid, 3 ss.
Syr. simp., 3 j. M.

SIG.—Teaspoonful after meals.

One week later my patient returned, saying that his side was much better, and that the pain had

changed. He, moreover, complained of headache, for which I gave small doses of morph. sulph., and advised the continued use of the uvedalia ung., as I was anxious to know something of the result of the vaunted cures by the uvedalia, and in less than a week he again returned, saying that the pain and soreness had entirely disappeared. It has now been over a week since he has felt anything of the pain. From the limited experience I have had with polymnia uvedalia in the form of an ointment for chronic rheumatism, it has given very good satisfaction. It relieves the pain incident to that disease, and gives better use to the joints than any application in the form of an ointment that I have used.—*J. Q. A. Clowes, M. D., in Medical and Surgical Reporter.*

GRINDELIA SQUARROSA.—Having noticed several articles and communications from different persons on *grindelia squarrosa*, recommending it in hypertrophy of the spleen and obstinate intermittents, I was induced to try it, and respectfully beg the privilege of reporting the results to the readers of your *Journal*.

CASE 1. Mr. B., 36 years of age, has had the chills for more than one year, the paroxysms occurring every third day, except occasionally an intermission of one or two weeks, in which time he was without any chills while taking some anti-periodic medicine. There was a slight protuberance in the left side, which was due to some splenic trouble. The patient had been treated by other physicians, but no permanent cure. Their quinine, as well as their arsenic and other remedies, had ingloriously failed. He was weak and rapidly becoming anæmic, and had that ill habit of body when the case came into my hands.

I prescribed sulphate cinchonidia in sufficient doses to arrest the paroxysm, after which time I prescribed:

℞ *Fl. ex. grindelia squarrosa*, ʒiss.;
Glycerine, ʒiij;

Misce et ft. sol. Sig. Tablespoonful three times a day.

My patient did not have another chill after taking the medicine, and has only taken one bottle full of the mixture. The pain left his side, and the spleen rapidly decreased in size; he lost that cachexia, his appetite is good, and he says he feels perfectly well.

CASE 2. Miss C., sixteen years old, was attacked with rather a peculiar form of intermittent fever. She was very much debilitated. While I was passing by the house where the girl's father lived, he called me in to see her. I found her complexion

very sallow, headache, appetite very poor, could eat but very little as it caused nausea, spleen very much hypertrophied, and the abdomen had grown very turgid. They had been giving everything that was recommended to them; she had gone the rounds of doctors and patent medicines. I was told that if I could cure her that they would pay me my own price. Remembering my success in other cases of chronic intermittents and enlarged spleens with the fluid extract of *grindelia squarrosa*, I promised them I would give her relief. After giving her enough sulph. cinchonidia to arrest the chill, I prescribed:

℞ *Fl. ex. grindelia squarrosa*, f. ʒi;
Glycerine, f. ʒiij.

M. S. Tablespoonful every four hours.

The medicine acted on her like a charm; even better than I anticipated. She has had no more chills, and is improving rapidly in every sense of the word. Under the action of the medicine the bowels began to act freely, passing a dark, bilious looking discharge, which lasted for more than a week, and which she said made her feel better.

She has taken about two bottles full of the mixture, and is enjoying good health.

I have tried the *grind. squar.* sufficiently often to test it, and in no instance have I known it to fail. As a remedy in splenic hypertrophy, nothing can excel it, and where quinine fails to break the chills this does the work well. Its action on the liver is satisfactory, no difference what the trouble is.—*T. S. Hopkins, M. D., Ridgeway, Ill., in American Medical Journal.*

USTILAGO MAIADOS A SUBSTITUTE FOR ERGOT.—The smut of maize is attracting considerable attention as a substitute for ergot. It is quite probable that it possesses other qualities in addition to those specific ones attributed to ergot, and that it may be found useful in other cases than those to which the rye fungus is applicable. Some extraordinary illustrations of its action on the impregnated uterus of inferior animals have lately been communicated to us. For instance, a herd of brood mares, some thirty or more, in the southern portion of the State, was pastured on a field of Indian corn, after the harvesting of the crop. All, or nearly all, dropped their colts. There was known to be a considerable amount of rust on the corn. A similar case is reported from Amador county. The action of the fungus (*ustilago maiados*), on the human system is under investigation.—*Pacific Medical and Surgical Journal.*



Publisher's Notes.

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NEW PREPARATIONS.

Vol. 2.

Detroit, October 15, 1878.

No. 4.

Original Communications.

Cereus Grandiflorus.

By RICHARD E. KUNZÉ, M. D., NEW YORK.

THE loveliest of all the cactus flowers, poetically called "queen of the night," is produced by *cereus grandiflorus*; order, *cactaceæ*; tribe, *cereastreæ*. In order to avoid possible mistakes in the identification and collection of this species, the ancient name of "*cactus grandiflorus*, L." should be forever discarded by all well-meaning manufacturers of pharmaceutical preparations. Seventy-five years ago only two or three species of night-blooming cerei were then well known, whereas to-day I can point out twenty-two distinct species in my collection of nocturnal blooming cerei, not to speak of several species of *phyllocacti*, a number of which have to my certain knowledge been palmed off in place of *c. grandiflorus*, to the unsuspecting physician and manipulator of drugs.

Like most of this handsome species, it is found in tropical America and the West Indies, each flower blooming but one night, and filling the atmosphere with its delicious vanilla-like fragrance. Even its juicy, yellowish fruit possesses such a sweet aromatic flavor that it is much sought after by birds and other animals. In fact very few are accessible to mankind in a perfect and ripened condition. Having fully and long ago described this plant in my monograph, I will briefly refer again to its action as a cardiac nervine and sedative.

It would seem that the indications for the use of this drug are even not half understood by those having long ago identified themselves with the exhibition of this remedy. It is particularly indicated in the so-called functional derangements of the heart, many of which follow in the wake of impaired digestion, and some of the fugitive attacks of excitement, now so common incidents of our daily life. In proportion as excitement begets nervousness, so do we find a corresponding and alarming increase of functional cardiac disease, mainly the result of "shock" to the sympathetic system of nerves. I think if physicians would be more careful in their observation with this cardinal remedy, it would be found to be applicable even in the graver lesions of this most important viscus of the human economy. The range of this drug I will briefly illustrate with some late cases in practice:

Case of *excessive palpitation*, following chronic dyspepsia:

Mrs. B., age 42, and of the bilious lymphatic temperament, called to be examined July 28th,

1878. She was married 21 years, but without children. Complexion sallow. Contour round. She gave the following account of previous condition: For a number of years dyspepsia had given her much uneasiness. While she had a good appetite, she always complained of too much fullness in epigastrium shortly after meals, and subsequent retention of flatus. Two years ago, was laid up with inflammatory rheumatism of the limbs only, which lasted six weeks. After this she noticed the first symptoms of palpitation, generally following any unusual exertion. Menstruation always very profuse. During the past year palpitation gained on her, especially after going up stairs, or after any other sudden exercise. For the past week this increased at such a rate that she noticed vibrations of the thorax. It now affected her mind, so that she became nervous as well as despondent, and in consequence was afraid to walk out alone.

It was found that she had a good appetite, and was regular in her habits. Palpitation is succeeded by a queer crawling sensation passing across the epigastrium and up to the right of the sternum, which, on reaching the point of the sternal notch, produces a sense of suffocation. If the attack is severe, it is followed by cardiac syncope. Pulse feeble and compressible—96 a minute, but regular in rhythm. Going up stairs induces palpitation and slight dyspnoea. The urine comes away in small quantities at a time, accompanied with slight pains in lumbar region. Considerable effort is necessary to empty the bladder, which has been observed for a few weeks. The uterus is hard and congested, tender to touch.

Auscultation elicited a laborious condition of the cardiac movements. At first found the sounds very irregular in time, the result of nervous excitement while under examination, which soon passed off. All the sounds were of a hammering character. No *bruit de soufflet*. Prescribed:

R *Tinct. cereus grandiflorus*, $\frac{3}{4}$ ij.

Sig. Take ten drops three times a day the first week, and fifteen during the second of using the medicine. Also take an extra dose of five drops pending a paroxysm.

Aug. 12th.—Patient informs me that she did not experience so much relief the first as after the second week of using the medicine. But after taking it a week menstruation appeared, which was one week later than it should have been—three weeks being the usual time, and yet no untoward circumstance occurred which might have retarded the flow. Palpitation is now only half as troublesome as formerly, even after indulging in more exercise. Cardiac pains relieved correspondingly.

Is not so nervous, and now far more cheerful. Looks more hopeful; her friends so informed her. Tenderness of abdomen, which was a source of much annoyance in the region between the umbilicus and epigastrium formerly, quite reduced in severity. Pulse now stronger, compressible, regular, and 88 per minute. Cardiac sounds nearly normal with a strong rhythm and regularity. Gave her:

R. *Tinct. cereus grandiflorus*, ℥ ij.

Sig. Take fifteen drops three times a day.

Aug. 27th. The husband of my patient requested a renewal of the same prescription. It had benefited her so much that he advised the continuance for a while longer. He claimed that the effect it had on her mind was alone worth taking it for. Palpitation quite overcome. For the occasional distress of stomach other treatment was resorted to.

Case of Nervous Palpitation. Miss Sarah C., æt. 16, a dark-complexioned girl of delicate figure, applied for advice August 8th, 1878.

She had suffered from attacks of palpitation for nearly a year, which for the last four weeks were followed by severe pain in the præcordia. Dyspnoea was quite a troublesome symptom of late, and succeeded by "incubus." Palpitation easily induced, and sure to be followed by sharp, shooting pains. She is of the nervous diathesis and easily excited. These nervous attacks are succeeded by temporal headache. Even in the night she is awakened with an occasional attack of palpitation. Another feature of the case is a copious perspiration following every paroxysm, which first made its appearance three or four months ago. Appetite not very good. Menstruation perfectly established during the past six months.

Found the pulse soft, regular, and 108 per minute. Cardiac sounds of a tumultuous character, yet regular in time, and accompanied by chest vibration. The sounds were the loudest in the upper cardiac region. Noticed a bellows murmur in the region of the fourth left costo-sternal articulation—its maximum intensity. I prescribed:

R. *Tinct. cereus grandiflorus*, ℥ jss.

Sig. Ten to fifteen drops three times a day.

Aug. 22d. This patient made such rapid improvement that she did not have to take the medicine in maximum doses. In fact, relief was obtained in such a short space of time that it never occurred to her mind to report in person. She was cured of that troublesome palpitation, and quite relieved of all previous nervousness.

Case of Hypertrophy of the Heart, with Valvular Deficiency. Mrs. Mary C., widow, aged 41, had just left the wards of Roosevelt Hospital, of this city, where she had been an inmate for six months, and was discharged because incurable. She called on me July 5th, 1878, to get relieved of the anguished state of her mind pending severe paroxysms of palpitation. It should be stated that pericarditis was the original cause of her trouble, and finally led to dropsical effusion, with albuminous urine, and other bad symptoms, due to heart failure. She stated that while using digitalis in the hospital she came near losing her life from the effects of large doses administered, and resulted in excruciating attacks of "cramp" of the heart, so that she refused to take any more of that medicine. It was the only medicine she had used during the past six months, and from rest and good nursing she experienced a more decided relief than from the former.

She complained of præcordial pains on any

slight exertion, followed by palpitation, dyspnoea and syncope. Excessive palpitation in the sternal notch, with a feeling of suffocation. Most of the cardiac sounds transposed much below the usual zone, and on a line with the epigastrium, and below that. Digestion much impaired, and low-spirited very generally. It was an incurable case, of course, and would only serve to point out the sphere of usefulness of *cereus grandiflorus* in mitigating the severe paroxysms. I gave her:

R. *Tinct. cereus grandiflorus*, ℥ j.

Sig. Take ten drops every four hours in a little water.

July 8th. Patient says that the severity of all of her bad symptoms was much ameliorated since taking the medicine. The principal source of trouble to her now was from dyspnoea (probably œdema of lungs) following any trivial exertion. Yet a better appetite was established from the time this medicine was used, and that melancholy disposition, which hung like a pall over her mind, yielded to the better established feeling of harmony between that diseased body and mind. I heard subsequently that while under the influence of this medicine she felt tolerably easy, thereby proving its good effects in grave lesions of cardiac disease.

Cascara Sagrado.

BX ALEX. M. CHEEK, M. D., Nashville, Tenn.



MY motto has been, prove and test all things, and hold fast to that which is good. Acting on this principle, and having received of the celebrated firm of Parke, Davis & Co., whose reputation is renowned over the United States for their pure and genuine drugs, several of their preparations, among which was the famous and much talked of cascara sagrado, which is meeting with such unbounded success in the four corners of the earth, I determined to give this drug a fair and impartial trial.

Case 1. Mrs. B., nineteen years of age, a blonde, three months pregnant, a primipara, applied to me for treatment. She stated that she had been troubled with constipation of the bowels sometime before her marriage, but was much worse since she became pregnant. Two physicians of this city treated the case without avail, and told the husband that nature must do the work. Deeming this a good opportunity to test the cascara sagrado, I prescribed it.

R. *Cascara sagrado*, fl 3 j.

Syr. Simp.

Aqua, aa. fl 3 j.

M. Sig. Teaspoonful 3 times daily. I met the lady a week after taking the medicine. She was perfectly delighted. She exclaimed: "Doctor that medicine acted like a charm. It is the finest remedy for constipation that I ever used." To make a long story short, I will say that the patient is fully recovered and feels as happy as an angel.

Case 2. Mr. Joseph B., husband of the lady mentioned in case first, contracted a severe cold which attacked his bowels. He had all the symptoms of acute dysentery, which lasted three days. He states that he was feeling so bad and in so much pain, and having no medicine at the house, except the medicine his wife was taking for constipation, the thought occurred to him that he would try some of it, thinking it would do him no harm if no good. Imagine his surprise after taking the fourth dose he found himself entirely relieved, the pain all gone and the discharge from the bowels

checked. So it seems from this case that the cascara sagrada may be useful in bowel diseases such as diarrhoea and dysentery. I hope some of the profession will give it a trial the first opportunity they have.

Case 3. Mr. C., professional man, thirty years of age, has been troubled with obstinate constipation for over six years. He attributes the cause to close sedentary habits while a student. He states that his bowels were regular before he entered upon the arduous duty of student life. He tells me that he has tried every medicine for constipation from podophyllin down to Simmons' Liver Regulator without finding a cure. I put him upon cascara sagrada, doses three times daily. He has now been taking the medicine over three weeks; he reports that he feels decidedly better, that his bowels are regular, and that he feels that he is on the high road to recovery. The future of cascara sagrada is flattering in the extreme. I deem it the greatest known remedy for constipation we have at the present day. I esteem it a very important addition to our materia medica.

Sulphate of Quinidia.

By JOHN C. STEWART, A. M., M. D., York, Me.

FOR two years I have used this preparation in my practice as a substitute for quinia, and with increasing confidence in its virtues. I was first led to test it in a severe epidemic of diphtheria on account of its expense being so much less than that of quinia, while their composition is held by some authorities to be isomeric.

The first case in which I used it was a boy of four years suffering a severe attack of diphtheria. I ordered 3 grain doses of sulphate of quinidia every hour until quinism should be obtained. After eighteen hours I saw him again. He had taken 48 grains. The temperature had fallen from 105° to 100°, and no signs of quinism had been developed. The temperature afterwards rose to 102°, while the amount of quinidia was gradually decreased to 3 grains each day, and the disease progressed to a favorable termination. Since then I have used quinidia in every case in which quinia seemed to be indicated. In a severe case of neuralgia of the fifth pair of nerves occurring periodically, I ordered quinidia with the effect of relieving the paroxysm by a single 5 grain dose, after a neighboring practitioner had failed to relieve it with the usual 5 grain doses of quinia repeated every six hours.

Not to quote from my notes further, my conclusions may be briefly summarized as follows:

Sulphate of quinidia is preferable to sulphate of quinia on account of its expense, which is only about one-half as great, while its antiperiodic powers are greater, as is shown by the investigations of the British Madras Commission. It is less liable to produce quinism, I having never seen a case arising from its use, while I have often seen it from quinia. Its power as a tonic is fully equal to that of quinia, while the dose need not be increased. The taste is less disagreeable, and it seems to excite the same catharsis that quinia has been observed to produce.

Chestnut Bark as an Antiperiodic.

R. F. HOOD, M. D., RED RIVER IRON WORKS, POWELL CO., KY.

SINCE writing you some weeks since about the virtues of chestnut bark as an antiperiodic I have put it through a most severe test, and have never found it fail in a single instance where pru-

dence was observed and directions followed. In forty cases of quotidian the paroxysm has been deferred to the fourth day in every instance where it returned at all. My mode of using it is to take 4 ozs. of the rough outside bark of the tree (the older the tree the better), put into a convenient vessel, pour one quart of boiling water over and let steep fifteen minutes and it is ready for use. Let the patient begin at any stage of the disease and take a teacupful every three hours. On the day the paroxysm is expected to return, if it should not return, go through the same course on the 6, 7, 13, 14, 20, 21 and 27th days, and I will almost insure permanent relief, or at least as much as can be attained from quinine or arsenic. I hope that you will take the matter in hand and concentrate the active principle and have it given a fair and impartial trial. Please send me a sample of the first concentration you make, that I may try it in my ague district. I venture to hope that careful trial will prove it superior to even quinine. Suffering humanity is entitled to it.

P. S.—I should have stated that I give a thorough mercurial purge before beginning with the infusion.

Treatment of Lead Colic.

By GEORGE KELLY, M. D., CLEVELAND, OHIO.

IN your last issue I see a note saying that a correspondent in Colorado wants some ideas on the treatment of "lead colic," or *colica pictorum*, as it is more scientifically termed. I have had quite a number of patients apply to me for relief from this very ugly disease, some of which were employes in the white lead works of this city. I have seen this disease in all its phases from the mildest type to the most violent, and the following treatment usually had the desired effect:

I first open the bowels in severe cases. I am as a rule compelled to resort to an injection composed of

Oleum ricini.

Molasses.

Saponis aa. ʒj.

Aquæ Tepidæ Oj.

M.

This seldom fails, in fact it never has in my hands. I then relieve the terrible abdominal pain with opium and proceed to give pot. iod. in 25 grain doses 3 times per day. If the opium fails to afford relief I use chloroform by inhalation.

This treatment has never disappointed me, and I give it for what it is worth.

Gelsemium in Epilepsy.

By M. P. GREENSWORD, M. D., POUGHKEEPSIE, N. Y.



ABOUT sixteen years ago I treated a case of convulsions in the person of an unmarried lady of 22. The convulsive actions of her muscles were very violent. Her eyes rolled about and her lips and eyelids were convulsed. During the paroxysms her teeth were firmly pressed together, and her body was sometimes bent backward and sometimes forward, as in tetanus. The paroxysms varied in duration from a quarter of an hour to twelve hours. Sometimes they recurred several times in the course of a day. They were periodical, occurring generally once or twice a month and sometimes oftener, and were more severe at the menstrual period.

There was so much gastric irritation that for seven months she was compelled to remain in bed all the time; and during that period she vomited up nearly all her food. This disease was of nine years' duration.

It was plain that dysmenorrhœa was the exciting cause of the fits; therefore, I told her when I commenced to treat her, that I would be compelled to try the aid of surgery, but agreed, like many other physicians who treated her, to use medicine first. She became so weak and emaciated from the fits and gastric irritation, that arrangements were made for her funeral, as her death was daily expected, when I commenced the use of the fluid extract of gelsemium sempervirens in connection with tonics and alteratives. After using the gelsemium a day or two, she commenced to have her fits at regular, instead of irregular, intervals, and they then occurred regularly once a week (Sundays). Then I gave the gelsemium alone on Sundays, and the fits appeared one day earlier (Saturday), when I also gave the same remedy Saturdays as well as Sundays, and the fits happened a day earlier (Fridays), when I gave the gelsemium also on Fridays, and the fits ceased. I now enlarged the os uteri by the use of a dilator and sponge tents, discontinuing the gelsemium, but continuing the use of the alteratives and tonics, etc. In about six weeks she was entirely cured and has since remained free from the trouble.

Lobelia Inflata.

M. P. GREENSWORD, M. D. POUGHKEEPSIE, N. Y.

I ATTENDED a middle-aged married lady of 40, with epilepsy. During the paroxysms of the disease she struggled so violently that it required the united strength of six able-bodied women to help to hold her and keep her from injuring herself. The paroxysms lasted for fifteen or twenty minutes and recurred three or four times. The intervals between them did not last longer than ten or twelve minutes. Knowing that these fits were caused by costiveness and that she must either have a movement of her bowels immediately or die, I used soap-water injections, but after using two large ones they failed to relieve her bowels or to remove the fits. I now thought of lobelia and instantly gave her half a teaspoonful of the seed. She had not swallowed the medicine two minutes before it vomited her, and turning downward, caused her to pass so much fecal matter that it filled a chamber almost to the brim. The fits immediately ceased and she has not had one in fifteen years.

Some time after this event I attended an infant with convulsions, whooping-cough and phthisis pulmonalis. Knowing that the child could not live but a few days, I assured the parents that although I could not save his life, I would stop the convulsions. I administered the lobelia seed and he never had another convulsion up to the time of his death.

I have often used this remedy successfully in fits. It produces relaxation of the muscles, and prevents as well as cures epilepsy and other fits. About a year ago I used this remedy in the convulsions of a child about three years of age. The bromide of potash had previously been only partially successful. This remedy (the lobelia) had only been used for two weeks when the convulsions, which were of daily occurrence, ceased entirely.

Gentiana Quinquiflora.

By DR. C. H. YELVINGTON.

THE following items hastily gathered from my note book, with reference to the therapeutical applications of gentiana quinqueflora, may be of interest to the readers of NEW PREPARATIONS:

CASE I. Mrs. B., thirty-seven years of age, married, has had three miscarriages, one still-born child, and one child born alive, which lived but forty-two hours. When called to see her, she was suffering with chills and hot flashes; was around the house, but complained of a peculiar tired sensation. Pulse one hundred and eight, respiration twenty-two, skin of a waxy appearance, lips bloodless, catamenia had made its appearance, three times within one month, discharge profuse; she also had for the past year suffered with looseness of the bowels, which was most troublesome at night, often causing her to arise from three to six times; always better in the afternoon. Bowels bloated considerable; well, a very peculiar case. I left her, saying I wanted an hour to think her case up. Her mind was considerably disturbed, and she was unable to concentrate it on any subject. I felt that this case must be treated carefully, and after much reflection made the following:

R. Myristica one drachm, pulv. helonias dioica one drachm, sacch. lactis six drachms. M. Triturate well in mortar, incorporating thoroughly. Div. in capsules of grs. v. Take one at nine o'clock in the morning, one at three in the afternoon, and one at nine o'clock in the evening or at usual bed time. This was to meet the condition of menorrhagia.

R. Tr. Senecio aureus one and a half ounce, tr. lillium tigrinum one half ounce. M. S. Take twenty drops in water before each meal as a uterine tonic. Again:

R. Tr. gentian quinqueflora three ounces. Tr. nux vomica one-half ounce. Tr. capsicum and myrrh (Thompson No. 6) one-half ounce. M. S. forty to sixty drops in water half an hour after meals.

I called on my patient in one week and found a decided improvement; the appetite which had for weeks previous been poor and capricious, had improved, the bowels were almost natural, the complexion better, and the menses did not return until their regular time, and ultimately under the same treatment an entire recovery was established, and the part that the gentian, as an antiperiodic in the condition of the bowels, was fully apparent.

CASE 2. Mrs. H., thirty years of age, married, mother of three children, lived near a lake and cranberry marsh (which in warm and dry weather was sometimes quite low, the bottom being exposed to the sun), had for several years had intermittent fever. The day she called at my office, had ridden in an easy wagon from her home, seven miles distant, to see me; had never been her medical attendant. Examination showed enlargement of the spleen to the extent that it was visible from the thickness of the left side, the diameter through the left side was at least two inches greater than the right side, great tenderness over the organ, and considerable disturbance and tenderness of liver, complexion indicated icterus, digestive organs impaired, gums showed previous effects of mercurials, some difficulty of breathing, rhythm of the heart unsteady. She wept when informed that the principal difficulty was splenic, as one of her neighbors had recently died from enlargement of the

spleen. After further conversation she became more cheerful and hopeful. Prescribed:

R. Bromide of potass. half an ounce, bromide of ammonium six drachms, diluted tr. of gentian quinqueflora six ounces. M. S. Take a teaspoonful in water half an hour before meals.

R. Fluid extract gelsemium three drops to be taken half an hour after meals.

Commenced to improve the first week, and in eight weeks discharged well, and no more medicine needed.

CASES 3, 4 and 5. Sons of Mr. Calvin Terrill Harmony, Susq. Co., Pa., was first called July 20th, 1875, to see the youngest, six years of age; found him quite stupid with high fever. This family lived near a water-course, and about thirty rods from a mill pond, which was sometimes full, at other times near empty, which caused a malarious atmosphere. History of the case: The child had for a week or more at times complained of chilliness and head trouble, which finally grew worse until they became alarmed (others in the same neighborhood were suffering in like manner). Here then was a case which would test the gentian quinqueflora; being without any complications, prescribed and left:

R. Tr. gentian quinqueflora two drachms, aquæ three ounces. M. S. A teaspoonful every two hours. Child to be kept in the house morning and evening, also through the hottest part of the day. The father in surprise inquired, if I was not going to leave any physic. I replied that I had left all the boy needed at this time, and that it was not best to run the boy through a threshing machine in order to have him get well.

Cases 4 and 5 were of the same type and treated with the same, and all recovered within one week after commencing treatment. No other medicines being used, and within four miles on the same water-course at least twenty other cases could be given, and in nearly every instance no other agent but gentian was used, and uniformly a complete recovery was reached from one week to ten days, and no recurrence of chills afterwards.

Rev. C. H. Jewell, pastor of the M. E. Church, Lanesboro, writes me, "I think that herb saved my life. I suffered fearfully with an abscess of the liver and was given up to die by a number of physicians, who did not benefit me in the least. Accident introduced the herb to my notice and, procuring some, I commenced its use. Improvement followed almost immediately, and soon I recovered under its use; it was considered almost a miracle at the time, and I believe it is the best remedy for a bilious condition ever used."

Rev. P. B. Van Sickle, pastor of the Presbyterian Church at Beech Creek, Pa., writes me: "Words fail to express my gratitude for the interest you have taken in myself, my wife and family. Mrs. Van Sickle has been very much benefited by the medicine you kindly furnished her, and is at the present writing feeling almost as well as ever."

The history of the case was as follows: The lady had suffered with chills and fever, and as all medication failed, she was advised a change of location. Her husband also suffering with chills and fever, and a bronchial trouble, his wife concluded to visit her relatives in New Jersey, and he was advised to go to Nebraska, which he did. Mrs. Van Sickle stopped here to visit some friends in this county, where her husband had formerly preached. Having been our pastor, she naturally came to her old doctor. I furnished her with a pint of the tr. of gentiana quinqueflora, which, after the return of her husband, called forth from him the above, which is an extract from his letter to me.

Cascara Sagrado in Constipation.

By J. G. SUTTON, M. D., Geneva, Ohio.



N reading of cascara sagrado, which is so highly recommended through your journal, I concluded to try it in that much dreaded disease, constipation. Accordingly, I ordered some of Parke.

Davis & Co. I tried it in a number of cases, in which it worked well, and in one case, which was especially interesting to me, it did more than I had expected. I was called to visit Mrs. S., who had been sick for the last three years, the last two of which she has not had a natural evacuation of the bowels, always being compelled to use an enema, which often failed to produce the desired effect, sometimes she would pass three or four days without an evacuation, although using an injection every day. She had taken cathartics without any benefit from a half dozen physicians from all schools, had adopted hygienic measures and carried them out well, but to no effect. I gave her

R. *Cascara sagrado*, $\mathfrak{z}j$.
Berberis aquifolium, $\mathfrak{z}j$.
Syr. simplex, $\mathfrak{z}ij$.

and ordered her to take a teaspoonful four times a day until her bowels acted freely (as I had forgotten to state, her bowels had not moved for four days when I first began its use), then but three times a day; the desired effect was soon produced. The dose was diminished one teaspoonful per day, and before she had taken the second prescription she said she needed no more medicine, and now she appears natural in that respect.

I also wish to state I have used the grindelia with good success in asthma. And in conclusion I think them two valuable remedies, which only need be tried to prove their virtues.

Nucleus in the Red Blood Corpuscle Again.

From H. A. JOHNSON, M. D., Chicago, Ill.



HAVE just read in your issue of July your comments upon D. J. Hoffman's letter in relation to the studies of the human blood by the late Dr. J. W. Freer, of this city. It is well known to many microscopists that Dr. Freer believed that he had discovered a nucleus in the human blood corpuscle. He did discover a body, which, if there is a nucleus, I think is it. In reply to your statement that you "doubt very much if the red corpuscle itself could be seen by reflected light at all," I beg to state that I have studied the red corpuscle by reflection, and have seen it hundreds of times. I presume I can show it well under a 1-25, and I presume higher powers. The methods of manipulation have been published, and are, I suppose, well known to experts. I send by to-day's mail a copy of the "*Lens*," in which the method devised by myself was first published. This article was copied, I believe, in the *London Microscopical Journal*.

That Dr. Freer's discovery was recognized abroad is evident from the notice of it in at least one foreign work, "*Text Book of Physiology*," by John Hughes Bennett, M. D., F. R. S., Edinburgh, 1872, pp. 61 and 65. Whether this is a nucleus or not is the question that seems not yet settled. The appearance of the corpuscle, as seen by reflected light, is given in plate III, fig. 12, of the same work. Dr. Freer's studies were published in the *Chicago Medical Journal*, April 15, 1869.

FROM DR. HOFFMANN.

Permit me to refer you, in recognition of your answer to my article on "The Red Blood-Corpuscle Nucleus," to the following evidence, more than sustaining me in my every point. I must correct the statement, however, that no notice of Professor Freer's discovery was taken abroad. Lately, a copy of *Bennett's Physiology*, 1873, was shown me to contain the following mention of his discovery: "When examined by a good oblique direct light on a black ground, Dr. J. W. Freer, of Chicago, showed me that the colored blood-corpuscles of men and of the frog exhibited a prominence in the center, as show plate iij, fig. 12, page 61, near bottom." Prof. Freer first published it in the *Chicago Medical Journal*, April 15th, 1869. Prof. Kollman, of Munich, refers to this subject at length, of which paper I translate: "Prof. J. W. Freer, Professor of Physiology, in the Medical College of Chicago, has used Wales' Illuminator for the examination of red blood-corpuscles. The improved method enabling observations to be made with a very strong light, and great magnifying powers, caused a remarkable peculiarity to be perceived in blood-corpuscles." It will be observed, that, not only on dry, but also on fresh blood-corpuscles, the nucleus is plainly visible, as aptly shown by the plates in *Bennett's Physiology*. I would merely add, that, since 1868, the nucleus has been yearly demonstrated at Rush Medical College. Professor Wadsworth has not received the letter of inquiry you refer to in your editorial, but is preparing an article for the *Chicago Medical Journal*, on above topic, to appear in November or December number. There is still more evidence to satisfactorily prove that our lamented, learned professor, F. W. Freer, is the discoverer of the red blood-corpuscle nucleus, and recognized as such by some of our best authorities here and abroad.

Respectfully,

Dr. J. C. HOFFMANN.

CHICAGO, Sept. 27, 1878.

Cascara Sagrado.

By C. W. HANSEN, M. D., Oakland, Cal.



WHEN camping in a little valley at the foot of Mount Shasta about a year ago, I was consulted by Mrs. S—. She had been a sufferer for five years, she said; had been to all the springs, and tried all the doctors in the country, without obtaining more than momentary relief. Her case was plain enough: sallow complexion, general emaciation, broad, flabby tongue, coated with a thick, yellow fur, foul breath, cardialgia, headache, a feeling of faintness and drowsiness, relieved for a short period by eating; habitual constipation, etc., all denoted a bad case of atonic dyspepsia. On examination I found the liver enlarged, regular in outline, with considerable pain on pressure over the left lobe, evidently due to congestion. Uterine functions but slightly disturbed, and no visible organic lesion. I could find no fault with her diet or general mode of living, and concluded, on the whole, that I had a very stubborn, if not hopeless case. On my return home I forwarded her 3 iv Casc. Sag., directing her to make a tincture with a quart of whisky, and to take a teaspoonful of the mixture undiluted directly after eating. I saw her again about a month ago, a well woman. She had experienced relief within a week, and the improvement had been steady and uninterrupted. I report her case, because I consider it typical of a large class commonly met with, and often a source of great annoyance to the practitioner. The cure I attribute to the stimulating properties of the whisky, and the action of the cascara in restoring a healthy tone to the gastric and intestinal glands and follicles.

Before closing I must speak of the cascara in hemorrhoids. When the disease is due to obstructions in the alimentary canal, it certainly acts like a charm; while other cathartics increase the trouble by their irritating action on the mucous membrane, the cascara is soothing and effective at the same time, and if taken persistently in small doses, will cure the disease entirely in the majority of cases.

Correspondence.

Inquiries.

I received the copy of NEW Shepherd's-Purse. PREPARATIONS, July number, am much pleased with it; is just what every physician should read. Will some one give their experience with capsella bursa pastoris (shepherd's-purse)? Yours truly,

W. C. GRIFFITH, M. D.

NEW CASTLE, Dixon Co., Neb.

I suppose like other Kalium Xanthogenatum. editors, you are willing to answer through your journal, NEW PREPARATIONS, such questions as subscribers may desire to ask. Will you in this way inform me if kalium xanthogenatum is suitable to be taken internally. I have been informed that a small quantity of this salt mixed with fruit will preserve it, without the necessity of cooking. I have prepared some in this way, which seems to keep perfectly, but I am afraid to set it before my family to eat without the advice of persons conipe-

tent to judge. I therefore address myself to you, and shall look anxiously in your publication, which I always read, for a reply.

A CONSTANT READER.

AUBURN, N. Y., Sept. 3, 1878.

I would request Fucus Vesiculosus. information as re- Allan's Anti-Fat Remedy. gards the injurious effects (if any) of fucus vesiculosus. Can you inform me as to the composition of Allan's anti-fat remedy, so extensively advertised. Several cases are reported to me where one or other of these remedies has resulted fatally. I am at present engaged in investigating this matter, and any light that you or any of your numerous subscribers can throw on the subject will be duly appreciated. Be kind enough to give this inquiry publication in your next issue.

W. H. D. LEWIS, M. D.

E. 47TH ST., CHICAGO, Illinois, Aug. 20, 1878.

Replies.

For the benefit of Dr. Hilton and others who wish a good baby syrup, please publish the following:

R. *Potas. bromid.*, ℥ij.

Paregoric, 3-j.

Syrup orange peel, ℥iv.

M. S. Teaspoonful often as necessary.

E. J. MARSH, M. D.

SOUTHWEST OSWEGO, N. Y.

Irritability of Children. July number of NEW PREPARATIONS, I find on page 64 the inquiry of Dr. Hilton, of Ann Arbor, Mich., for a remedy whereby to allay irritability of children, where it is not desirable to continue opiates. As I informed you in a former communication, I am no M. D., but have composed medicines after the prescriptions of the best physicians in Pozen Province, Prussia, and recollect that in such cases as Dr. Hilton mentions, they were prescribing tinct. croci (pp. 345, resp., 338, Pharmac. Germ.), made of the genuine crocus sativus, sold in this country under the name of "Spanish saffron." A good many physicians in this country say that the crocus has no medical qualities; a drug, though, whereof two drachms will kill a man can hardly be called wholly inert, and as the tincture had a good effect in Europe, it might be worth trying here. Dose, five to twenty minims, in syr. simp., in intervals from fifteen minutes to two hours.

On perusal of the

JOHN THOMPSON, Apothecary.
CUSTAR, O., Aug. 13th, 1878.

Our friend, Mr. E. H. Sargent, the eminent pharmacist of Chicago, informs us that fluid extract catnip—old woman's remedy though it may be called—is really a very valuable agent in controlling the irritability of children, replacing opium and its preparations. —[ED.]

This salt is composed of one equivalent of C_4H_5O , KaO , $2(CS_2)$, oxide ethyl, one oxide potassium, and two of bi-sulphide carbon. It is a slow poison in doses of from two to four drachms. In small quantities it is probably harmless. This salt, when brought in contact with acid and the air, liberates sulphurous acid and carbonic oxide (or carbonic acid), to which properties are due its antiseptic effects. When used in small quantities for the preservation of fruit, the acids in the fruit would decompose the salt, and the resulting products would be harmless ones [ED.]

Communications.

I have used quite extensively some of P., D. & Co.'s new remedies, as for instance, cascara sagrado, for habitual constipation; grindelia robusta, for asthmatic affections; cereus grandiflorus, for palpitation of heart; boldo, for indigestion and torpor of liver (all fluid extracts), and have not been disappointed. Each and every article has come fully up to the recommendation of it in back numbers of your NEW PREPARATIONS.

In all my past experience of thirty-five years of practice, I have not found such uniformity in

good results from new remedies, as I have in those advertised by your journal.

ERASTUS T. BUSSELL, M. D.

168 PARK AVENUE, INDIANAPOLIS, Ind.

Black Haw.
Yerba Santa.
Grindelia Robusta.
Jaborandi.

I have used fluid extract black haw with good success in the only two cases that I have had an opportunity to do so in, and I think it worthy of further observation. Also

used yerba santa and grindelia robusta with surprising good results in cases of bronchitis with asthmatic complications; have used a preparation of jaborandi said to be Parke, Davis & Co.'s, but could obtain no satisfactory results from a four-ounce bottle, hence am of the conclusion they did not make it, as I have seen some of Parke, Davis & Co.'s used since with satisfaction.

O. C. LUCAS, M. D.

MT. VERNON, Ill.

I have tried Parke, Davis & Co.'s preparation of cascara sagrado in a great many cases of constipation, and it has not failed to give the best of satisfaction in every case. Mr. S., a bad case of constipation, compelled to take physic every week.

R. *Fluid extract cascara sagrado*, ℥j.
Syrup simplex, ℥ij.

M. Sig. Teaspoonful 3 times a day. In one week reported himself regular as a clock, only having to use one-half teaspoonful three times a day. I could report many cases with equally good results, but let this suffice for the present.

C. M. SPARKS, M. D.

1333 EASTERN AVE., CINCINNATI, O.

Having made frequent use in my extensive practice of the cinchonidia sulphate, and still prescribing it largely with great success, I coincide fully with the author on page 63. Mr. John Thompson, Custer, Ohio. It is a valuable substitute for quinine, only a little more active on the cerebrum in children. Glad to get your little journal occasionally.

LEO DE LEUW, M. D.

BADEN, NORTH ST. LOUIS, Mo., Sep. 5, 1878.

I am using grindelia robusta in a case pronounced heart disease. I located the trouble in the bronchial tubes, either rheumatic or neuralgic. He had been under treatment of professors in Syracuse University and several other eminent physicians of Auburn, without the least benefit. He has taken the grindelia for ten or twelve days with the most favorable results. I heard from him yesterday by his brother, who says he has improved amazingly; is around smart, telling every invalid he meets to go to Phelps, to old Dr. Burt. But we must wait for results; if it proves truly a cure you will hear from me again.

J. BURT, M. D.

PHELPS, N. Y., Aug. 12, 1878.

I had a case of nervous headache of several years' standing, a lady aged sixty years, which baffled all medical treatment, but after giving fl. ext. guarana in half-teaspoonful

doses, three to four times per day, for several weeks, effected a permanent cure. The patient says she feels better than she has for years. I have used it in other cases with excellent results. In fact it has never failed me when indicated. I think it is a nervous tonic, antispasmodic and sedative. It is certainly indicated in low stages of fever, where there is brain trouble. I would not practice without the remedy.

I had a patient, male, aged 50 years, who had jaundice and enlargement of the liver of several years' standing. I treated him for several months, chionanthus being the leading remedy. He is now nearly well. I have used it in a number of cases of torpid liver, with fine results. Its medicinal properties are alterative, aperient and diuretic, with marked effect. Given in doses of from ten to twenty drops, three to four times per diem.

I would, with the balance of the testimony, call the attention of the profession to this most excellent remedy.

I had case of a girl aged 12 years who had *herpes zoster* in a severe form. I prescribed:

R. *Berberis aquifolium*, 4 ℥
Iodide potassium, 4 3.
Water, 4 3.

M. S. Dose, teaspoonful 4 times per day. This single prescription cured the disease in three weeks.

I have used it in other diseases wherever an alterative was indicated with splendid results. I would think it an excellent remedy in scrofula, herpes and any form of vesiculæ.

But let me add that we should study more about these remedies and get better acquainted with them. In the future I may say something on this subject, as without this particular study and knowledge I could scarcely practice medicine.

JOHN A. HEMING, M. D.

RED KEY, Indiana.

I have had very satisfactory results from cascara sagrado, and the pulsatilla. I believe that in the sagrado you have a remedy for constipation of immense value, and even if while discovering this you have experimented with several things which have proven of little utility your labors have not been in vain.

Respectfully yours,

H. H. BAKER, M. D.

CLEVELAND, O., July 2, 1878.

One of my patients has taken two bottles of fluid extract fucus vesiculosus, and weighs 27 lbs. less than she did when she commenced taking it. Another one has taken one bottle and is 15 lbs. lighter, and she is as happy as a bird. She has done her housework for a large family all through this hot weather without any help. She had the asthma when she commenced this remedy, but all symptoms of it have disappeared.

Very truly yours,

C. S. MAYNARD, M. D.

PAW PAW, Mich., July 20, 1878.

Mrs. J. aged 26. Prim. **Fucus Vesiculosus.** Menstruates regular, very scant and painful, never lasting longer than two hours. Weight, 176 lbs. Ordered a dessert spoonful of fluid extract fucus vesiculosus, to be taken three times a day and continued it until two pounds were taken, with

a net gain of seven and one-half pounds, and improved digestion. She quit the new remedy in despair, having taken it for obesity.

Yours respectfully,

J. P. DICE, M. D.

XENIA, O., August 15, 1878.

Cascara Sagrado.
Salicylic Acid.

So far as I have used your new preparations I am well pleased with them, especially the cascara sagrado, yerba santa, berberis aquifolium and gentiana quinqueflora, as a regulator of the bowels and a tonic to build up the system after our malarious fevers. I have never seen anything to equal the fluid extract cascara sagrado, combined with nitro-hydrochloric acid.

I see in your January number a communication over the signature of W. M. Dodson, M. D., on the use of salicylic acid, who seems to not be satisfied with his formula. I will give mine:

R. *Salicylic acid*, 3 iv.

Liq. ammonia acet., 3 viii.

M. Sig. Tablespoonful every three hours. This prescription I have used in acute articular rheumatism with marked success, and with no unpleasant effects.

When I have more time will give further experience with other preparations.

Yours truly,

J. D. LOONEY, M. D.

BRINKLEY, Ark., July 17, 1878.

Fluid extract actææ rubra is said to be a violent cathartic. I used it in 7 drop doses on myself without any effect. Gave it to a lady in 10 drop doses. Instead of purging, it produced a voracious appetite and toned up her system. In another case (lady) I administered 20 drops thrice daily to overcome an obstinate constipation, without relieving the cause. Increased to 30 drops thrice daily it produced regular stools daily, increased the appetite and toned up the system wonderfully. Suppose the drug should be tried in a relaxed digestive tract, debility, and possibly in dyspepsia and chronic gastric troubles.

Respectfully

HENRY P. WENZEL, M. D.

THERESA, Wis., September 23, 1878.

I have used a great deal of this with success in my practice. I am located in a country where we have a great deal of malaria to treat. I have used almost all antiperiodics known, and like sulphate of cinchonidia better than quinine. It has this advantage over the latter that it is cheaper, produces less cerebral disturbance, and is as efficient as quinine. In the treatment of intermittent fever, the plan I usually pursue is to give a purgative of calomel and rhubarb, or calomel, and ext. colocynth comp., followed by 10 grs. doses of sulph. cinchonidia, of which I give enough to interrupt the paroxysm; then to complete the cure I give the following:

R. *Arsenious acid*, grs. iv.

Strychnia sulph., grs. ij.

Cinchonidia sulph., 3 iss.

Iron sulph., 3 iss.

Aloes soc., 3 i.

M. ft. massa. Divide in pill, 90. One three times daily after meals. By pursuing the above-named course, I seldom fail to effect a cure. More soon.

G. W. BAYLOR, M. D.

WILLTOWN, IND., Sept. 17, 1878.

Your journal, NEW PREPARATIONS, which you were so kind to send me, has been received and closely perused. I cannot see how a physician who wishes to keep pace with the advancing medical science, can afford to be without it, especially so when the sum of twenty-five cents will secure a year's subscription. I see reported cases from the pens of some of my old class-mates, whom I know to be reliable gentlemen. It is truly *multum in parvo*. Hoping you years of success, I am truly, etc.,

J. B. MARCHAND, M. D.

CORNING, Ark., Aug. 28, 1878.

Berberis Aquifolium. During the past year, having considerable venereal practice, I have used **Cascara Sagrado.** **Grindelia Squarrosa.** **Damiana.** berberis aquifolium, for syphilis, almost to the exclusion of other internal

remedies, with very gratifying results. Occasionally I have combined 5 gr. doses of iodide of potassium, and in nearly 100 cases have had the pleasure of seeing the disease disappear more promptly in every case than it ever did when I relied upon the old forms of treatment. Cascara sagrado, in constipation; grindelia squarrosa, in chronic intermittents and glandular enlargements; damiana, as a nervous stimulant, to the genito-urinary organs particularly. I have used all quite extensively, and am surprised to find them possessing such positive

healing powers. In each instance I have found them to bear out fully the recommendation of Dr. Bundy, and from the experience had, am convinced that they are invaluable to the healing art. My use of the remedies named began last autumn, and has been quite extensive and prolonged, so that I feel that my conclusions are not hasty, and can be supported by any who make careful use of the medicines. Have used several more of these drugs, but not long enough to warrant writing of their merits in detail, lest my conclusions should prove to be premature.

R. L. LEONARD, M. D.
CHICAGO, Aug. 24, 1878.

Your July number for 1878 **New Preparations** of NEW PREPARATIONS to hand. I am very thankful for same. It is something very much in want of by most physicians. Our U. S. Dispensatory, being revised so seldom, makes your journal more interesting. I am sure that nothing could add more to the physician than a good journal on therapeutics. Inclosed please find one dollar, as stated by circular. Send back numbers as soon as you can. I shall look for much wanted information. I am a practitioner of 23 years' standing, and must say, after two hours' perusal, never found so much matter of real interest.

Hoping to have something new again, I remain,

Yours truly,

D. A. JAMESON, M. D.
MILLICON, Tex., September 16, 1878.



NEW PREPARATIONS.

GEO. S. DAVIS

AND

C. HENRI LEONARD, A. M., M. D.,
Editors.

DETROIT, MICH., OCTOBER 15TH, 1878.

GEO. S. DAVIS, Publisher.

Editorial.

With this number our editorial connection with NEW PREPARATIONS ceases. *Tempora mutantur et nos in illis mutamur.*

C. HENRI LEONARD.

GEO. S. DAVIS.

New Preparations for 1878 and 1879.

THE new remedies brought prominently to your notice in this and the preceding numbers of this year's NEW PREPARATIONS are cascara sagrada, yerba reuma, boldo, rhododendron max, cereus bonplandii viscum album, quinine flower (sabbatia Elliottii), and smilax sarsaparilla. Besides articles upon the properties of these new comers there have been numerous papers upon the remedies introduced in the two preceding years of the publication of this journal. Prominent among these stand berberis aquifolium, fucus vesiculosus, grindelia robusta, grindelia squarrosa, eucalyptus, damiana, ustilago maidis, viburnum prunifolium, coca, thuja occidentalis, substitutes for quinine, colocynth, and several miscellaneous articles, as those upon the discovery of the nucleus in the red blood corpuscle, questionable remedies, and novelties in pharmacy, etc.

Our contributors have come from nearly every State and Territory of the Union, and represent some of the best talent that this country affords, and we are free to say that no journal has been able to present so much that was new and practically interesting for so small an outlay to their subscribers as has NEW PREPARATIONS. We promised them at the beginning of the year, an improved and enlarged journal over the 1877 one, and we think we have fully kept our promise; at least we have endeavored to do so by nearly doubling the amount of reading matter furnished, and in changing the size and style of "making up" of the page.

The support given our enterprise, as evinced in our large and increasing subscription list, has exceeded our fondest anticipations, proving to our satisfaction that NEW PREPARATIONS is filling an important space in medical literature.

For the many kind commendatory words from all sections of our country, we return our sincere thanks.

For 1879 we can promise you still further im-

provement, in that we shall change its publication from a quarterly, that it now is, to a regularly issued *monthly*.

The MONTHLY NEW PREPARATIONS will be, as in the past, devoted to the introduction of new remedies, both crude and prepared. We shall endeavor to give all obtainable facts relative to new drugs, and shall furnish much valuable information—not to be found elsewhere—to physicians interested in this branch of knowledge. While no space will be devoted to the advocacy of new theories of medicine, we shall be glad to chronicle any new discovery pertaining to medical science in any branch, which may be supported by the proper evidence.

EDITORIALLY we shall not hold ourselves responsible for opinions or statements made in any of our contributions. The policy of NEW PREPARATIONS will be a broad one, and its columns are open to any one who has presumable facts to offer. While we shall endeavor to eliminate all matters bordering on charlatanism or new theories, we prefer our readers to judge for themselves as to the value of such communicated articles as we may insert.

From the very nature of the case, but little information relative to new remedies can be found in the books, else there would be no field for NEW PREPARATIONS. Hence we must derive our knowledge from such sources as we have at our command, even though we accept suggestions from such humble sources as Aunt Chloe or poor Lo.

Once in the hands of the intelligent and observing practitioner, some valuable agent may be rescued from obscurity to occupy an important mission in future therapeutics. In such case our object is gained, and we can afford to overlook the few, which under the searching test of practice, have proved of little value.

NEW PREPARATIONS will be issued promptly on the 15th of each month, and the subscription price will be increased to one dollar. We trust our old subscribers will be prompt with their renewals so that our subscription books may be got in readiness for the prompt mailing of the January number, and that they will aid us in securing as many new subscribers as possible. The more encouragement we get this way, and in the matter and number of contributions sent us, the better journal we can furnish you. It is as much for yourselves, as for us, that this should be done, as it is the aim of NEW PREPARATIONS to be the journal upon new remedies for all practitioners.

Changes in New Preparations.

THE present number closes Volume II of NEW PREPARATIONS. Started originally as a pamphlet, which was issued irregularly, and only at such times as necessity seemed to demand, it was found necessary, two years ago, from the development of

the new field it had opened, to give the publication journalistic form, and it was made a quarterly.

We are frequently greeted with new journals, which are set afloat to supply some "long felt want." It requires but a brief time, however, to demonstrate the fact that this want in many instances existed only in the brain of their originators—that it has been by no means keenly felt outside of this. In the case of NEW PREPARATIONS, the feeling that such a want existed, was originated and supported by facts which were developed by the pamphlet which preceded it—facts, therefore, which were not figments. The success, furthermore, which has attended the publication, goes to prove that NEW PREPARATIONS had a field which was peculiarly its own. So increasing has been this success, that the publisher now finds that the quarterly no longer suffices. The plan of the work is original, and provides for the publication of correspondence in which is contained the reports of practitioners on the use of the various new drugs which have been placed on the market. At times the correspondence received is very voluminous, and accumulates to such an extent that when the date of issue has arrived, it is found necessary, from sheer lack of space, to reject much valuable material. Then again, correspondents are apt to lose interest from the fact that they are obliged to wait for what, in these progressive days, is a very long time before their articles meet the eyes of their professional brethren. Many valuable facts of daily experience are thus left unrecorded. These are some of the reasons which, in addition to those which have numbered the days of almost all quarterly publications, medical, as well as non-medical, have determined the publishers of NEW PREPARATIONS, to convert it into a monthly journal. Their success in catering to the wants of the profession heretofore, inspire them with confidence, that they, in the present departure, will but more fully minister to these wants.

With this change in the frequency of issue there will also be a complete change in the editorial management. It gives us pleasure to announce in this connection that the name of Dr. Wm. Brodie, of Detroit, will appear as editor in future. It will be scarcely necessary for us to say anything by way of introducing Dr. Brodie to our readers. Few in the profession enjoy such an extended or popular acquaintance with his brethren in this country. At present President of the Association of American Medical Editors, he has been identified with medical journalism since its inception in Michigan. For a quarter of a century an active member of the American Medical Association he has at various times occupied the position of Secretary and first Vice-President of that body. Anything which we might say in support of his ability to edit a medical journal would be entirely supererogatory.

The size of each number of the journal will be the same as heretofore, and the increase in its price

of subscription will be but in proportion to its increased frequency of issue. NEW PREPARATIONS will therefore be furnished after January 1st, 1879, for one dollar per year. Without disparagement to other very cheap and very good journals, we affirm that NEW PREPARATIONS under its new form will contain more matter, by actual measurement, for the price, than any other journal published in this country.

We can but hope, in severing our editorial connection herewith, that the encouragement and success which have attended our efforts will be continued to our successor in that increased proportion to which his abilities are entitled.

That Red Blood-Corpuscle Again.

REFERRING to the communication of Dr. H. A. Johnson, of Chicago, ex-President of the Illinois State Microscopical Society, published on page 83, we would say that, from the *Lens* sent us we find that his method for examining the red blood-corpuscle by reflected light is only applicable to binocular instruments. We had incidentally discovered the same in the use of our binocular (a Collin's) when using the direct tube, leaving the eye-piece out from the other; but we had never made the practical use of it that Dr. Johnson has. His method is to reflect the light by means of prism, or mirror, down the unused tube, and this ray then being thrown directly upon the object to be examined by the Wenham prism, which is in use in binocular instruments. This method is, of course, impossible to be employed upon monocular microscopes, and it was these we had in mind when we wrote as we did. Still, Prof. Stowell assures us that by a carefully manipulated apparatus for reflected light, he has been able to examine the corpuscles with an ordinary monocular; though this would not be practical or satisfactory in its results for ordinary microscopists. Certainly a one-quarter inch objective is the highest we have ever been able to use successfully by reflected light, and with this we could do work of no value upon such minute objects as the blood corpuscles.

But to return more especially to Prof. Freer's discoveries.

From Dr. E. Fletcher Ingals, one of the editors of the *Chicago Medical Journal and Examiner*, and professor in Rush Medical College, we have received the following postal cards:

188 CLARK ST., CHICAGO, Aug. 20, 1878.

DEAR DOCTOR—I understand you have published a couple of articles relative to the discovery of the nucleus of the red blood-corpuscle, in which you erroneously give the credit first to a German physiologist, and secondly to Dr. Stowell. I have seen Prof. Joseph W. Freer, lately deceased, demonstrate them time and again for the past ten years, but he first proved their existence many years earlier. He was indeed their discoverer. I think he never published anything on the subject in this country, but it may be found in some foreign works. Yours truly,

E. F. INGALS.

188 CLARK ST., CHICAGO, Sept. 9, 1878.

DEAR DOCTOR—You will find a complete description of the nucleus in the red blood-corpuscles in the *Chicago Medical Journal*, Vols. XXV and XXVI, 1868–69, published by Dr. J. W. Freer, their discoverer. Yours truly, E. F. INGALS.

Our articles must certainly have been misread on the point of declaring Dr. Stowell the *first discoverer*; what we said was (see July number of NEW PREPARATIONS), “Prof. Stowell never made the claim that he was the first to demonstrate the nucleus; he *was* the first, however, to demonstrate it, by satisfactory methods, in this country, we fully believe.”

In the same number of NEW PREPARATIONS Prof. Stowell himself says:

“This nucleus has been seen by several histologists and physiologists, *both in this country and abroad*; but when their methods of work have been published, and others have followed their directions, errors have invariably been pointed out, and the then so-called nucleus was absorbed in ‘optical delusions’ and changes brought about by the reagents used.”

We have italicized a few of the words, as it plainly shows the professor has not been ignorant of the labors of his confrères. In the blood of the foetus it has long been known that the red corpuscle is nucleated, especially from the sixth to the eighth week of intra-uterine life. Even up to the fourth month the plainly nucleated corpuscle can be seen. Beal has also noticed in some blood passed by the bladder a nucleated appearance of the corpuscle, and has plated the specimen with the nucleus; yet he lays no special stress upon it, regarding it as a “peculiar” condition “resembling” a nucleus.

In the communication from Dr. J. T. C. Hoffman, of Chicago, printed on page 84, you will notice that, though Bennett is spoken of by Dr. Johnson, in *his* communication as pronouncing this appearance of a nucleus, you will see his language is not very clear on that point; if Dr. Hoffman has quoted him correctly, he does not say that it is a nucleus at all, but simply that a *prominence is exhibited in the center*, leaving the reader to his own inference as to what that prominence is.

In the quotation Dr. Hoffman makes from Prof. Kollmann, of Munich, it is only a “*remarkable peculiarity*” that is spoken of, leaving you to your own judgment as to *what* that peculiarity is. Now, had either Beal, Bennett or Kollmann really believed that it was the nucleus they were showing, do you think they would have taken this round-about way to express themselves? If Beal thought it *was* a nucleus, would he have said it was a “peculiar” condition “*resembling*” a nucleus, especially when he was acquainted with the fact that the foetal blood-cell *is* nucleated? If Bennett thought it *was* a nucleus, would he have called it a “prominence?” Or, if Kollmann thought it *was* a nucleus, would he have been so foolish, after being so minute in the details of manipula-

tion, as to call it a “remarkable peculiarity?” No, gentlemen; these are not the “expressions” of scientific men for *known* conditions; in fact, the weight of the testimony of these trans-Atlantic histologists is *against the idea that they were looking at a nucleated corpuscle at all*. They knew Prof. Freer *thought* he was showing them a nucleus; but they, instead of detecting this—a nucleus—saw but a “prominence,” a “peculiar condition;” not so much as using the synonym of nucleus at all.

Now, we have no doubt that Prof. Freer was honest in his conviction that he had discovered a nucleus—notice he does not use the equivocal terms employed by Bennett, Kollmann or Beal—and that our contributors also firmly believed in his demonstration of the same. But with this we are hardly satisfied, as we still are firm in *our* belief that our friend, Prof. Stowell, is the first to *satisfactorily* demonstrate them on this side of the Atlantic. It is also morally certain that Prof. Freer’s demonstration was *not* satisfactory to either Bennett or Kollmann, for had it have been we would not have had so many “peculiar” clauses relative to that demonstration. The only way to definitely settle the question now is to find out by a series of carefully conducted experiments of Prof. Freer’s and Boettcher’s combined, on the same blood specimens, under the same conditions. Prof. Stowell is now engaged upon these experiments, and we sincerely hope other microscopists will do likewise, so that we can get at the bottom of this matter.

Caution.



WE have yet to caution our readers in the purchase of the new remedies so lately introduced by us. Continually are we hearing of our friends buying a certain drug and getting such contrary effects from its use that we are sure there must be an error either in the original packer, or in the jobber who sends it out. Particularly is this caution applicable in distinguishing the two species of *grindelia* from each other. The *grindelia robusta* is a plant that is demulcent in its nature, although of quite positive action on unstriated muscular fibre, whilst the *grindelia squarrosa* is almost its opposite. The dose of the former (*robusta*) is one-half to one fluid drachm, or more; the latter, only from five to ten minims. The former is almost a specific in asthma, the latter equally reliable for reducing enlarged spleens following malarial poison. The *robusta* is unsuited for spleen enlargements, and the *squarrosa* equally unfitted for spasmodic bronchial troubles. Yet, in spite of all this, certain manufacturers advertise *grindelia squarrosa* as a cure for *asthma*!

We will send reprints from our journal giving minute descriptions of the therapeutical application of these drugs, to any one who will send stamp.

Book Reviews.

THE PHYSICIAN'S POCKET DAY-BOOK. By *C. Henri Leonard*, A. M., M. D. Accommodates daily charges for twenty or forty families weekly; has complete obstetrical record for 94 cases, and monthly memoranda for Dr. and Cr. cash account. Russia, pocket and flap. Price, post-paid, \$1.00; your name on side, in gold-leaf, \$1.25. Detroit, 1878.

We have no hesitancy in saying that this is the cheapest and best gotten up pocket-record now out. All printed matter has been omitted, so as to make it as light as possible. A full description is given on the second page of cover. If your book dealer does not have it, it will be sent post-paid on receipt of price, by the author.

ON THE THERAPEUTIC FORCES: An effort to consider the action of medicines in the light of the modern doctrine of conservation of forces. By *Thomas J. Mays*, M. D. Philadelphia, Lindsay & Blakiston, 1878. Large, 16 mo., pp. 142; price, \$1.25.

The author, in his preface, says that his views "will at once be denounced as being too theoretic by the so-called practical men of the day." Well, we are just one of these "so-called practical men," at least, so far as our opinion of the author's arguments are concerned. We do not see that he has either added to or taken from our old-time notions of the actions of remedies by treating of them *specifically* as conservators of force. He uses the few remedies he treats of in exactly the same manner and doses as ordinary practitioners, but does so all the while with his special hobby in mind, and thinks thereby he is more scientific in his prescriptions.

Although we do not like the book as a whole, yet there is much in it upon the value of foods, etc., the chemistry of digestion and excretion, that will well repay one for its careful perusal.

A MANUAL OF OPERATIVE SURGERY. By *Lewis A. Stimson*, B. A., M. D., surgeon to the Presbyterian Hospital, professor of pathological anatomy in the Medical Faculty of the University of New York. With 332 illustrations. Philadelphia, Henry C. Lea, 1878; 12 mo., pp. 477; cloth, \$2.50. Detroit, E. B. Smith & Co.

The author has sought only to give the details of the more common and important surgical operations, and in this, by the use of terse language and abundant illustrations, he has given all the steps of an operation as clearly as could be wished for. He has divided his work into seven parts: the first treats of the accessories of an operation; the second of ligature of arteries; the third of amputations (one of the best written sections to be found in *any* treatise of surgery); the fourth of excision of joints and bones; the fifth of neurotomy and tenotomy; the sixth plastic operations on the face; the seventh of special operations, as those on the eye, nose, pharynx, abdominal organs, genito-urinary organs, etc.

The author has spent but little of his space on vain theory, or on the microscopical minutiae of details, as how to hold your knife, and the like. In this the practical surgeon will warmly commend him. We fail, however, to find anything upon anal fistula, one of the commonest operations in minor surgery. The book, though, is well worth its price to any physician.

ANATOMY, DESCRIPTIVE AND SURGICAL, by *Henry Gray*, F. R. S., with 522 engravings on wood. An introduction on general anatomy and

development, by *T. Holmes*, M. A., Cantab. A new American, from the eighth and enlarged English edition, to which is added **LANDMARKS—MEDICAL AND SURGICAL**, by *Luther Holden*, F. R. C. S. Philadelphia: Henry C. Lea, 1878. 8vo., pp. 983; sheep, \$7.00; cloth, \$6.00. Detroit: E. B. Smith & Co.

This is the latest edition of the standard Gray, which has become a household word and work with American as well as English physicians. Though the work of a young man (it was written when Gray was in his twenties), it was then, as now, a model of anatomical exactness, skill at dissection, and perspicuity at delineation. Drs. Carter and Westmoccott certainly deserve their full share of praise in the mechanical skill exhibited in their drawings from young Gray's and Cooper's dissections. Since Gray's death in 1861 (he was then but thirty-four years of age), this monumental work has been in the hands of skilled surgeons and editors, and several minor anatomical and typographical errors have been corrected. The present editor of the revised editions also assisted the author on the "proof sheets" of the original edition. Mr. Lea, the American publisher has also had his several editions in the hands of such careful anatomists and scholars as Prof. Darling, of New York University, and R. J. Dunglison, of Philadelphia. He has also added the recent work of Mr. Holden, "Landmarks—Medical and Surgical," thus supplementing fully the brief chapters upon surgical anatomy in the text proper, as given by Gray. Though the additions now made by Mr. Lea to the well thumbed edition with which we are familiar, number one hundred pages, and the wood cuts are increased by one hundred and twenty-eight, even yet the price is less than we paid for ours.

NERVOUS DISEASES, their Description and Treatment, by *Allan McLane Hamilton*, M. D., Fellow of the New York Academy of Medicine, one of the attending physicians at the Epileptic and Paralytic Hospital, Blackwell's Island, and at the out-patient department of the New York Hospital, member of the Neurological Association, etc. With fifty-three illustrations. Philadelphia: Henry C. Lea. 1878. 8vo., pp. 512; cloth \$3.50. Detroit: E. B. Smith & Co.

In his preface the author says that it has been his "object to produce a concise, practical book," that insanity he has purposely excluded, but has added a chapter upon cerebro-spinal meningitis. The work is, indeed, a practical one; one of the best classified and arranged works upon nervous diseases that is now printed. Two chapters are devoted to the introduction and description of instruments; then follows the diseases of the cerebral meninges, diseases of the cerebrum and cerebellum (five chapters), diseases of the spinal meninges and cord (five chapters), bulbar diseases, cerebro-spinal diseases (two chapters), and diseases of the peripheral nerves (four chapters). The microscopical cuts are very fine, being produced by the new patent hard rubber process, which, for this work, delineation of the microscopical characteristics of tumors, far surpasses any ordinary wood engraving. At the back of the book is quite an extensive formulary of the author's favorite prescriptions. In the matter of points of diagnosis and treatment, the author is brief and terse in the use of his phrases, hence the book's eminent practicability, especially for busy practitioners. In manner of treatment to be pursued the author is decidedly modern.

FOWNE'S MANUAL OF CHEMISTRY, THEORETICAL AND PRACTICAL. Revised and corrected by

Henry Watts, B. A., F. R. S. A new American, from the 12th English edition, edited by *Robert Bridges*, M. D., Prof. of Chemistry in the Philadelphia College of Pharmacy. With 177 illustrations. Philadelphia, Henry C. Lea, 1878, 8°, pp. 1028; cloth, price \$2.75; leather, \$3.25. Detroit, E. B. Smith & Co.

This edition of "Fowne's" has been brought down to the latest moment possible with its present issue from the press. Former errors in nomenclature or typography have been corrected, and the English decimal standards or centigrade in the 12th edition have been supplemented by those in more common use on this side of the Atlantic. The size has been increased by nearly 200 extra pages and the addition of a finely executed lithograph, in colors, of various important spectra. The text is remarkably clear and plain; its arrangement you are all familiar with, and though in two volumes in the English dress, Mr. Lea has given us all this, with many important additions by the American editor, in a handy little volume, and at a very moderate price.

FIFTH ANNUAL REPORT OF THE SECRETARY OF THE STATE BOARD OF HEALTH OF THE STATE OF MICHIGAN, FOR THE FISCAL YEAR ENDING SEPT. 30, 1877. Lansing, 1878.

Of the important papers composing this report are the several reprints hereafter noticed. There is an excellent *résumé* of the "Small-pox Epidemic in Detroit," "Baths and Bathing," by *Henry F. Lyster*, M. A., M. D., Detroit; "Hereditv in its Relation to Public Health," by *H. O. Hitchcock*, M. D., President of the Board; "Recreations, their Influence on Health," by *Rev. Chas. Brigham*, Member of the Board. "Resuscitation of the Drowned," by *R. C. Kedzie*, M. D. Weekly Reports of the Diseases in the State, for the year 1877, compiled by the Secretary, *Henry B. Baker*, M. D.

BIBLIOTHECA MEDICA. A Catalogue of American and British books, periodicals, transactions, etc., relating to medicine, surgery, dentistry, pharmacy, chemistry and kindred subjects. Classified by subject, with an index by authors; 8°, paper, pp. 244. Cincinnati, Robt. Clarke & Co., 1878. Price, 25c., post-paid.

This is certainly one of the best classified medical book catalogues we have ever examined. It is well worth quadruple the price the publishers ask for it as a reference book upon medical literature. We have examined the lists with a good deal of care, and are astonished at their completeness.

THE PHYSICIAN'S VISITING LIST FOR 1879. Twenty-eighth year of its publication. Philadelphia, Lindsay & Blackiston, 1878. Tuck, pocket and pencil; 50 patients weekly, \$1.25. Sold by all booksellers and druggists.

This is the oldest visiting list now published, and contains, besides blank leaves for charges, those for obstetric engagements, nurse's address, vaccination engagements, record of births, deaths, etc.

A GUIDE TO THE PRACTICAL EXAMINATION OF URINE. By *James Tyson*, M. D., Professor of General Pathology and Morbid Anatomy in the University of Pennsylvania, etc., etc. Second edition, revised and improved, with illustrations. Philadelphia, Lindsay & Blackiston, 1878; cloth, 12°, pp. 172; price, \$1.25.

This is one of the best works upon the subject of urinalysis published. It is not so extended in the minutiae as some works upon the same subject, but is, as its title indicates, a *practical* guide. The second edition we notice has been considerably improved over the first. On page 71 of our

little Dose Book (see second cover page of this number) we give a much handier test for sugar than this volume contains, at least to our notion. We have employed it now for years to the almost entire exclusion of other tests. It is as follows: albumen, of course, being precipitated and filtered off. Take of Potassic bicarbonate 96 grains; of sodic carbonate, the same; of cupric sulphate, 32 grains; of potassa, 64 grains; of water, 2 ounces (fluid); of this blue solution and the suspected urine take equal parts, and then boil; if sugar is present the copper is sure to be reduced. I have known this to detect where Trommer's test would fail. We have a bottle of it now on hand that was made fully five years ago and it is just as good as it ever was for observing the presence of sugar, though it has been used dozens of times and kept loosely stoppered.

Pamphlets.

JOURNAL OF IOWA AND ILLINOIS CENTRAL DISTRICT MEDICAL ASSOCIATION, 1878. By *Drs. P. L. Eyster, A. W. Cantwell and Charles C. Carter*, Publication Committee.

THIRTEENTH ANNUAL ANNOUNCEMENT OF EVANSVILLE, IND., MEDICAL COLLEGE. 1878-9.

ANNUAL ANNOUNCEMENT OF THE COLUMBIA VETERINARY COLLEGE OF N. Y., 217 E. 34th Street. 1878-9.

IS MODERN EDUCATION EXERTING AN EVIL INFLUENCE UPON THE EYESIGHT OF OUR CHILDREN? By *A. W. Calhoun*, M. D. Reprint from *Atlanta Medical and Surgical Journal*.

ANNOUNCEMENT OF DETROIT MEDICAL COLLEGE, 1878-9.

TENTH ANNUAL REPORT OF THE CENTRAL FREE DISPENSARY OF WEST CHICAGO.

TRANSACTIONS OF THE STATE MEDICAL SOCIETY OF KANSAS, AT ITS TWELFTH ANNUAL SESSION HELD IN TOPEKA, MAY, 1878.

MICHIGAN RAILROAD GUIDE, OCT., 1878.

TWENTIETH ANNUAL ANNOUNCEMENT OF THE CHICAGO MEDICAL COLLEGE, 1878-9.

THIRTY-SECOND ANNUAL ANNOUNCEMENT OF THE STARLING MEDICAL COLLEGE, COLUMBUS, OHIO, 1878-9.

INTRACULAR DISEASE. By *C. A. Robertson*, A. M., M. D., Albany, 1878.

VARIOLA—Its Causes, Nature and Prophylaxis, and the Dangers of Vaccination. By *C. Spinzig*, M. D. An 8° pamphlet of 86 pages. Book and News Co., St. Louis.

SIXTEENTH ANNUAL ANNOUNCEMENT OF THE PHILADELPHIA DENTAL COLLEGE, 1878-9.

TWENTY-NINTH ANNUAL ANNOUNCEMENT OF THE WOMEN'S MEDICAL COLLEGE OF PENN., PHILADELPHIA, 1878-9.

ANNOUNCEMENT OF THE MEDICAL COLLEGE, ST. LOUIS, 1878-9.

HOYNE'S ANNUAL DIRECTORY OF THE HOMŒOPATHIC PHYSICIANS OF ILLINOIS FOR 1878-9, WITH THOSE IN INDIANA AND MISSOURI.

VALEDICTORY ADVICE TO GRADUATING CLASS OF HAHNEMANN MEDICAL COLLEGE OF CHICAGO. By *C. H. Vilas*, M. A., M. D.

LABELING MEDICINES, by R. C. Kedzie, M. D., member State Board of Health. HEALTHY HOMES FOR FARMERS, by same. DIET FOR INFANTS, by Arthur Hazelwood, M. D., member of State Board of Health. MEMORIAL ON ILLUMINATING OILS; SCARLET FEVER, replies to 66 questions on the subject by 31 regular correspondents of the State Board of Health. PLAN OF WORK in the office of State Board of Health.

All the above are reprints from the Michigan State Board of Health proceedings, and are of interest to those engaged in hygienic and sanitary pursuits.

SEVENTY-FIRST ANNUAL ANNOUNCEMENT of the College of Physicians and Surgeons, New York city. Copies supplied by the secretary of the fac-

ulty, Dr. John G. Curtis, cor. Twenty-third street and Fourth avenue, New York city.

MEDICAL EDUCATION OF THE PEOPLE, their best safeguard against imposition in the practice of medicine. By Thos. N. Reynolds, M. D. Reprint from Trans. Mich. Med. Soc.

FOURTH ANNUAL ANNOUNCEMENT of Homœopathic Medical College of the University of Michigan for 1878-1879, Ann Arbor, published by the University. Supplied by the Dean of the College.

POSTURAL TREATMENT of Tympanites Intestinalis following Ovariectomy, by Edward W. Jenks, M. D. Report from *Am. Jour. Obstetrics*, July, 1878.

Clippings.

JABORANDI AND ITS ACTIVE PRINCIPLE PILOCARPINE.—Jaborandi has been used in this country and in Europe during the last four years to a considerable extent for its diaphoretic and sialogogue effects. But, remarkable enough, while the preparations used have given entire satisfaction in the hands of many, severe complaints about the uncertainty of their action can be heard from others.

Can the difference in the action of—in my opinion—so valuable a drug be satisfactorily explained?

In Brazil where jaborandi has been used as a diaphoretic and—according to trustworthy reports—as a diuretic, long before we knew anything about it, the leaves of the following plants are known as “Jaborandi:”—*piper jaborandi* (Willdenon), *serronia jaborandi* (Guillenica), *monniera trifolia* (Aublet), and *pilocarpus pinnatus*.

Who would expect to find that these different plants, which not even belong all to the same species, possess exactly the same properties?

I have used the leaves of *Pilocarpus pinnatus*, the fluid extract made of them, and last, but not least, the active principle *pilocarpine* in its combination with hydrochloric acid, known as hydrochlorate or *muriate of pilocarpine*. I have found the action of jaborandi and its preparations in a great majority of cases, *reliable, quick and decided*, and I do not hesitate to say that I consider jaborandi—derived from *pilocarpus pinnatus*—as the *most powerful diaphoretic and sialogogue* known at the present time. That unpleasant disturbances, such as vomiting, headache, dizziness, fainting, colic, etc., are occasionally found to be produced by it, *might* be expected from such an active remedy, but, aside from the slight gastric disturbances, *I have never* found any unpleasant symptoms to occur.

If I employ the leaves, I do it in the form of an infusion, which is prepared in the following way: Half an ounce of the leaves is coarsely powdered, and ten or twelve ounces of boiling water is poured over it. The infusion is kept at a temperature somewhat below the boiling point for about 15 minutes and strained. Of this I administer a small teacupful (warm) every two hours, and in the majority of cases I obtained good diaphoresis about 10 minutes after the administration of the first dose. Of the different preparations of jaborandi which I have employed I obtained, generally speaking, the least satisfaction with the infusion, Nausea, vomiting, and sometimes headache, accompanied or followed in some cases the diaphore-

sis produced by the administration of the infusion of jaborandi.

The fluid extract, which has probably been most frequently employed, has given entire satisfaction in all cases of adults. I employ the following simple formula:

R. *Ext. jaborandi (pilocarpus pinnatus)*,
Syr. *simplic. aa.* ʒ ss.

M. S. Teaspoonful at 2, 4, 6 and 8 P. M., and at 8 and 10 A. M., 12 and 2 P. M. the next day.

The patient is to be kept in bed, well covered, and from 8 to 10 minutes after the administration of the first dose, its diaphoretic action takes place. After the second or third dose the diaphoresis is at its height. The flow of saliva commences, according to my observations, always *after* the diaphoretic action has begun, although it has been stated by others that the sialogogue influence of the drug becomes apparent *before* its diaphoretic action can be observed.

I advise the patient to be careful not to swallow the saliva, but *to let it run from the mouth*, and found with this little precaution that vomiting does not generally occur, if at all, it takes place with the fourth and sixth or seventh dose. Other disturbances I have not observed.

Jaborandi deserves further trial, and will be found of good service, when properly used, in cases of parenchymatus nephritis, general anasarca, pleurisy, bronchitis, etc. Prof. Marme, Gottingen, states: atropine, in small doses, arrests all action of jaborandi, while large doses of pilocarpine *cannot* overcome active doses of atropine.—Paul H. Kretschmar, M. D., in *Hospital Gazette and Archives of Clinical Surgery*.

JABORANDI (*Pilocarpus Pinnatus*).—For three years past I have used this valuable agent in various diseased conditions of the broncho-mucous membranes, especially of an acute catarrhal character, and usually prescribe the fl. ext. in doses of one drachm, to be taken at the bed hour; a glass of warm lemonade to be taken half an hour previous. Under these conditions, the peculiar characteristic effect of the drug will be apparent in *fifteen minutes*, and free elimination from the skin and broncho-mucous membrane continues from two to four hours, followed by a long and refreshing sleep. The patient, on awaking, seldom experiences any irritation, soreness or other difficulty in respiration—the acute choriza being entirely corrected. Meeting with such flattering success in the management of those cases, and

becoming familiar with the physiological action of the drug, I suggested it in *the mucous variety of croup*, in which cases the increased elimination of the aqueous elements, by the broncho-mucous membranes, seems to greatly *dilute* the usually thick mucous and fibrinous exudation, and thus prevent the *tracheal and bronchial casts*, so frequently met with in this variety of croup.

For a child from three to five years old, should take from *three to five* minims of the fl. ext. every fifteen to twenty minutes, in severe cases, until three or four doses are taken, unless sooner relieved. A good rule is to give the child twice as many drops as the child numbers years. For simply a harsh, croupy cough, ten minims of *glycerine* may be added to small doses of jaborandi every two to four hours. Children who are subject to "catarrhal fever," with a very sudden rise of temperature, often resulting in convulsions, should be treated with this agent; as the rapidly increased transpiration to, and elimination from the skin, which this agent so quickly induces, will thus reduce the temperature and equalize the circulation in at least one-fourth the time usually required by the much abused *aconite treatment*. Among the entire list of "New Remedies" the jaborandi has more than fulfilled the most sanguine anticipations of those who were instrumental in bringing it to the notice of the profession.—*Chicago Medical Times*.

JABORANDI AND HOARSENESS.—Dr. Eyselein, of Blankenburg, recently administered forty-five grains of jaborandi to a lady who was suffering from hoarseness and pain in the neck due to a cold. The leaves were powdered, and a cupful of boiling water poured over them; after standing fifteen minutes the decoction was sweetened and was administered at 8 P. M. After a few minutes the patient experienced an agreeable sensation over the entire body, which was rapidly succeeded by strong, general pulsation, nausea, vomiting, fleeting pains in the abdomen, especially over the region of the bladder, and an outbreak of abundant perspiration. These symptoms were accompanied by great general discomfort and extreme prostration. The perspiration continued for about two hours, and the bed-linen was soon soaked through. Three times during these two hours sudden chills set in, the body, face and extremities becoming cold for a time. The perspiration was accompanied by a very profuse discharge of saliva; soon after it began, the hoarseness disappeared entirely, and did not again return. In consequence of the general lassitude the patient soon fell asleep, but the saliva continued for a long time to run out of the corner of the mouth. The perspiration did not involve the hairy parts of the head. On the next day the patient complained of weakness and lassitude; the left submaxillary gland was somewhat enlarged and tender, the appetite poor, and the saliva thick. This case shows the necessity of caution in the administration of large doses of jaborandi, although the dose was fifteen grains less than is ordinarily given to an adult at a single dose. The effect on the hoarseness was all that could be desired, but it was attained at the cost of very great discomfort.—*London Medical News*.

CHRONIC PLEURISY.—REMOVAL OF A LARGE EFFUSION BY JABORANDI IN LESS THAN THREE WEEKS.—John L. C., a weaver, æt. 23, was in good health until last summer, when he was exposed to wet at the sea-shore, and since has been subject to occasional pain in the left chest, and a slight cough, dyspnoea and mucous expectoration tinged with blood. He went into "Episcopal

Hospital" five weeks before his admission here. At that time he had daily chills. His chest was then aspirated and five pints of clear serum drawn off. He improved after this and left the Hospital. His former symptoms, however, returned, including the chills, and he came to our ward five weeks after he had been aspirated. I found effusion in left chest, displacing the heart to the right and causing much suffering. I was unwilling to aspirate again, because in chronic pleurisy after aspiration the fluid is apt to return, and after several aspirations the fluid may become purulent. I therefore gave him a drachm of the fluid extract of jaborandi four times daily. The effect was as follows: Chills passed away, temperature was reduced from 101 deg. to normal, the pulse and respirations are almost normal. As regards physical signs dullness has disappeared except at lowest part of left chest. I can everywhere hear the respiratory murmur, although it is feeble at lowest part. The effusion has therefore almost disappeared. I think the relief obtained is permanent; for if you can remove a fluid by medical treatment it is generally not likely to return. During the treatment the patient was sweating profusely, and I may say that the larger quantity of this effusion passed away by the skin. It should be added that the case progressed to a perfect cure, and the patient was discharged January 19th, 1878.—*Canadian Journal of Medical Science*.

JABORANDI FOR ANASARCA.—Some ten days ago, I was sent for in a hurry to visit a very poor woman, ten or twelve miles distant, who had been brought to my office a few days previously with extreme anasarca, remittent fever of several months' standing, and almost exsanguineous, to whom I had given quinine, vegetable alterative aperients (never gave mercury) and solution of nitro-muriate of iron; but I could not go to see her. The messenger told me she had no fever, but the anasarca was worse, that suffocation was imminent, and that she was spitting blood. I ought to state that the day she was brought to my office was very inclement, and she was miserably clad.

I gave the messenger who came for me an ounce of fluid extract of jaborandi, and told him to hurry back and give a teaspoonful every hour until the perspiration and saliva should flow freely.

I had supposed she was dead, until yesterday her husband came and told me she was doing well, except aphthous mouth and diarrhoea, for which he wanted more medicine; the anasarca had all disappeared, except some oedema of the feet and ankles. He said the fourth dose caused profuse secretions, and relieved the breathing and arrested the hemoptysis very promptly; but he continued the jaborandi till he had given all. I have no idea that any other known remedy could have reached the disease in time to have saved life. But the question still is, Did the excessive continuance of the jaborandi cure the irritation of the alimentary mucous membrane?—*D. W. Foster, M. D., of Ville Platte, Louisiana, in Virginia Medical Monthly*.

ACUTE BRIGHT'S DISEASE CURED BY JABORANDI.—**** And now you will, of course, want to know what our treatment has been, how we have brought it about that in the course of two weeks after her admission the patient is entirely recovered. The general dropsy, albumen in her urine, and dyspnoea all gone together. I ascribe all my success in the treatment of this case to the free use of jaborandi. Five days after the jaborandi treatment was begun, the whole face of the case was changed. The dose I ordered was one drachm

of the fluid extract of jaborandi thrice daily. This dose produced excessive diuresis and diaphoresis. I am convinced that in jaborandi we possess a most valuable agent for combating the dropsical complications of Bright's disease. It should be given either in the form of the infusion, or the fluid extract. In cases where uræmic poisoning is a factor, and where the drug is consequently not well borne by the stomach, I have administered jaborandi by injecting it into the bowel. Though the effects of the drug when injected were not so striking as in the present case, I yet see no reason why it should not be given by the bowel as well as by the mouth. I have also tried the drug hypodermically, but I prefer not to speak positively at present of its effects when so used. In one instance I will say that it did produce considerable irritation of the skin. How are we treating this woman, now that the dropsy has all gone? She is taking dialyzed iron internally and hypodermically. This treatment is improving vastly her general health and nutrition. The origin of the disease in the present case is a very common one. It was brought on by cold and exposure. In children, acute Bright's disease generally follows scarlet fever. In adults it usually comes on immediately after exposure to dampness and vicissitudes of weather.—*Dr. DaCosta in Hospital Gazette.*

THE ACTION OF JABORANDI.—I have to report three cases in which the uncertain action of this drug was curiously exemplified. The cases were treated simultaneously, and were under the treatment of Dr. J. S. Cohen.

The first case was suffering from aortic stenosis, with excessive œdema of the lower extremities; this condition followed long exposure to the toxic influence of lead. The urine was largely increased by the action of the jaborandi, the patient having to evacuate the bladder every two hours. The œdema was considerably diminished. The treatment was continued with benefit for two weeks, when it was discontinued, owing to the disturbance at night, caused by the necessity to evacuate the bladder.

The second case was one of muscular pains following saturnine toxæmia. The use of the drug was followed by diaphoresis and considerable relief to the pains.

The third case was one of bronchitis, with great dryness of the fauces and larynx; the result was thorough salivation, to the amount of one pint of saliva during the night. There was no marked improvement in the symptoms, but the patient expressed himself as feeling "lighter in the head."

In each case half a drachm of the leaves was used, in decoction, to the dose. The drug acted respectively upon the kidneys, the sudoriferous glands and the salivary glands; in no case was more than one of the organs of elimination acted on at once. What determines this variety of action in different cases it is difficult to say. Whether jaborandi acts through the nervous centers, or as a local stimulant to the excretory functions, is an interesting question, but one that has not, as far as I know, been answered.—*A. H. Mellersh, M. D., in Medical and Surgical Reporter.*

COTO-BARK, COTOIN, PARACOTOIN.—Shortly after the appearance of jaborandi, another drug of probably equal importance was introduced from Brazil and Bolivia. Its definite specific properties in several diseases render it likely that it will occupy a prominent position in our materia medica, and will very soon be adopted into the pharmacopœia. It is not yet definitely known

from what tree the coto-bark is derived. Some suppose it belongs to the lauraceæ or terebinthaceæ, whilst others think it originates from the piperaceæ. Its peculiar action renders the latter view most probable. It occurs in commerce in irregularly broken, flattened, or slightly curved pieces, 0.2–0.3 meters in length, and 8–14 millimeters in thickness. It has a reddish cinnamon-brown color, an aromatic odor, a peculiar biting taste, slightly bitter, but not particularly astringent. Wittstein (*Archiv. f. Pharmacie*) found the principal ingredients to be an ethereal oil, a fluid alkaloid with a herring-like odor resembling that of propylamin, a soft and a solid resin. According to Jobst, the bark contains about 1.5 per cent of a crystallizable substance called cotoin, which can be extracted by ether. From water it is extracted in small quadrilateral prisms of a pale yellow color; from alcohol in prisms of larger size. These have a pungent taste, and neutral reaction; cotoin is slightly soluble in cold, readily in warm water, ether and alcohol. The same chemist stated that after his examination of the first specimens, a second supply was received, from which he extracted a somewhat similar crystallizable body in yellowish, flattened crystals. In this specimen, however, the peculiar pungency of cotoin was not observed, nor was its solubility so great. Jobst gave this the name "paracotoin," and remarked concerning it that there was a similarity between this bark and the cinchona bark, where, with very little external difference in appearance, we may extract quinine, cinchonidin, or cinchonin. Merk gives the following distinction between cotoin and paracotoin: cotoin is soluble in hot water, melting immediately therein; paracotoin, on the contrary, is only slightly soluble, requiring long continued boiling. Upon the addition of nitric acid, cotoin turns red, paracotoin green. Besides, the solubility of the two differs widely in alcohol and ether.

Coto was first tested clinically in Germany by Prof. Gietl, of Munich. His experiments were made in part with the powdered bark and in part with an alcoholic tincture (one part bark to nine of 85 per cent alcohol), and his conclusion was that in this agent we possessed a specific in various forms of diarrhea. Dr. Riecker, of Stuttgart, experimented more fully and came to similar conclusions.

Recent issues of our German exchanges contain the best accounts of the therapeutic effects of this agent which have thus far appeared. Two of these reports are especially noteworthy, and we shall therefore present abstracts of them. The first is a Directe Mittheilung to the *Allgemeine Medicinische Central Zeitung*, No. 55, 1878, by Dr. Fronmüller, who states that during the past year he has employed coto and its preparations therapeutically, two hundred times. Of 143 cases, he has carefully tabulated statements of the results obtained. The maladies from which these 143 patients suffered were, pulmonary tuberculosis 62, typhus 38, catarrhal diarrhea 12, acute articular rheumatism 8, gastric catarrh 6, pneumonia 6, uterine colic 3, bronchitis 2, œdema of feet 2, rheuma 1, anorexia 1, diphtheria 1, albuminuria 1. In 93 of these cases there was severe colliquative diarrhea, and in 91 profuse sweating, also colliquative; both these complications very frequently co-existed. Of the various preparations coto-tincture was employed 109 times in doses of 15–500 drops, averaging, however, 100 drops per day; cotoin was used 24 times, twice in solution, 22 times in powder (0.1–0.3 several times a day); paracotoin was resorted to five

times in somewhat larger doses, and the resin also in five cases.

The clinical administration of the coto preparations was mainly symptomatic, as it was employed principally in cases of excessive diarrhea and sweating.

In the treatment of diarrhea, coto was used in 92 cases, in 85 of which it was administered in the form of tincture. These diarrheas were principally of a colliquative nature, the result of typhus and tuberculosis. A cure was effected in 50 of these; the diarrhea was partially controlled in 26, and in nine cases no result was obtained. The average dose was 50-100 drops of the tincture daily. In a majority of cases there was a relapse of the diarrhea in a few days, but it could then be more readily checked than before; if continued for some time the usual result was that the passages became quite regular. This tincture (1 part bark to 9 of alcohol) was generally quite readily taken by the patients, whether diluted with water or not. In a few cases, in which very large doses were administered, complaint was made of burning and itching sensations in the throat. A peculiar advantage claimed for the agent by Froumüller is that it increases the appetite whilst the remedies usually resorted to diminish it. The best mode of administration, in his opinion, is to drop it on a lump of sugar, or dilute it with water.

Froumüller's attention was directed to the effect of coto on hyperhidrosis by the observation of a case of phthisis with colliquative diarrhea and sweating, in whom both these symptoms disappeared after full doses of the medicine given for the purpose of checking diarrhea. From that time forward, he employed it in cases of hyperhidrosis with excellent results. Altogether he ordered the tincture in 91 such cases, with 34 perfect, and 36 partial cures, while 21 cases seemed uninfluenced by it. The good effect, which seems to depend upon increased tonicity of the superficial vessels, usually lasted but one night, though sometimes longer. Digestion was not impaired; the appetite was indeed so often increased that the writer frequently administered it throughout the morning hours as a stomachic in anorexia. For its full effect he here found it necessary to give 100-200 drops *pro die*; for night-sweats he advised the same quantity toward evening.

Cotoin and paracotoin were given in all 18 times in various forms of diarrhea; 9 of these resulted in perfect, and 6 in partial cures; whilst in 3 cases no effect was produced. In night-sweats these two agents were also given 18 times; 8 were stopped, 9 partially controlled, and 1 was not affected. A peculiarity observed by Froumüller in the urine after the administration of cotoin was, that, if treated within six hours after its passage with nitric acid, a distinctly red color was produced. If allowed to stand a few hours longer, the phenomenon will not be manifested. The great objection to the more general use of cotoin at present is its very great cost.

The second communication to which we call attention is that of Prof. Baelz, of Japan, in the *Central Blatt, für d. med. Wissenschaften*, No. 21, 1878. He states that when cholera appeared in Yokohama in July, 1877, he made the experiment of employing paracotoin subcutaneously in doses of 0.2 grammes. The quantity at his disposal was so exceedingly limited that it sufficed only for the treatment of five cases, all Europeans then resident in Japan. The results in these were so very striking, that we give in full the account of one of them, a well nourished girl of

twenty-two years. The physician, called in four hours after the first manifestations, found her in an apathetic, almost cyanotic condition, with cold extremities, and thread-like pulse. There was frequent vomiting, with rice-water stools passed involuntarily. At 4 P. M., 0.2 grm. paracotoin was administered subcutaneously (suspended in equal parts of water and glycerine). Vomiting ceased immediately. The next stool, one and a half hours afterward, was thin; the same amount of paracotoin was now given *per os*. All the symptoms improved; the pulse became stronger and regular, the extremities were warm and the cyanosis disappeared. Cognac was given in small quantity at intervals of fifteen minutes. At 8 P. M. another stool. At 12 o'clock at night another injection of paracotoin. On the next day the patient was very weak, but improved rapidly.

In the same house, the following day, Baelz cut short another case of cholera by paracotoin. The other three cases were milder. In one of them such constipation was produced by the paracotoin as to render castor oil necessary a couple of days subsequently. One of the patients, a pregnant woman, continued to vomit for two days after complete cessation of the diarrhea.

The only objection Baelz finds to the use of paracotoin subcutaneously, is its very slight solubility in convenient fluids. He considers equal parts of glycerine and water as the best vehicle.—*The Cin. Lancet and Clinic.*

PARACOTOIN AS A REMEDY IN EPIDEMIC CHOLERA.—Prof. Baelz, of Tokio, Japan, contributes to the *Centralblatt* of July 6th, an account of his striking success with this remedy in cases of malignant cholera. He administered it in doses of 0.2 gramme by hypodermic injection, suspended in equal parts of glycerine and water. The cure was prompt in five cases, all in which he used it, and the Japanese government has taken measures to provide a supply of the drug, in the event of another outbreak.

CEREUS BONPLANDII AND GENTIANA QUINQUEFLORA IN PNEUMONIA.—And now, as I have given a few rough thoughts as to the pathology of pneumonia, I will give briefly what I consider a rational treatment. I do not wish it to be understood that my treatment is a stereotyped one, that every case receives exactly the same medicines and doses, for all are not found with the same complications or in the same stages of the disease; but in all cases my patients receive the supporting treatment, both as regards medicines and regimen. Was summoned to see Mr. T., æt. 37 years. Temperament sanguine, bilious; had been exposed to inclement weather for two days; taken ill during the night. Found him very much distressed for breath; respirations hurried, with sharp lancinating pains in both lungs; severe pain in the head; wild expression of the eyes; forehead bathed in a cold perspiration; pulse remitting, but running from 120 to 136 per minute. Diagnosed pleura pneumonia with cardiac implication. Found sinapisms at feet, and mustard-plasters over lungs; the family had bathed the feet; also given warm drinks, but the patient being very restless, bed-clothing could not be kept on him. I immediately ligated the extremities, made a strong infusion of *asclepias tuberosa*, ordered half a teacupful every hour or two as necessary, applied warmth to the extremities, gave gr. x of Beach's diaphoretic powder, and left gr. v, with direction to give every two or four hours to relieve pain and produce diaphoresis. Bowels were in a normal

condition. To control the pulse and heart's action, gave

R. *Fl. ex. gelseminum.*
Tr. Cereus bonplandii, aa. 3j.
Aquæ, 3ij.

M. Sig. A teaspoonful every two hours, alternate with other medicine.

Called to see patient eight hours later. Examined the lungs; found, on percussion, dullness with crepitation over both; suffering less pain in head; had been obliged to loosen the ligatures, as faintness occurred: I now applied the jacket poultice made of wheaten bran, as hot as could be borne, to be renewed every three or four hours. The tongue had assumed a dark brown color through the center, with white margin, broad, flat, and fissured crosswise; pulse more soft and full, but intermitting every seven to ten beats; medicines continued. For diet, gave eggs well beaten, with cream and sugar; also beef tea. Bowels had not moved. Twelve hours later saw patient; decided improvement. Had commenced to expectorate a frothy mucus streaked with blood. I now continued the gelseminum and cactus as before, but directed it to be given in connection, or at the same time with the pleurisy root infusion, also

R. *Tr. sanguinaria com.*, 3j.
Tr. arum triphyllum.
Tr. symplocarpus fœtida, aa. 3ij.
Tr. gentian quinqueflora, 3ij.

M. Sig. A teaspoonful every two hours.

Bowels had not moved. Twenty-four hours later saw patient; continued to improve; expectorating freely; bowels not moved; directed an enema of warm water; tongue cleaning; appetite returning; enema moved the bowels gently; medicines continued. In ten days patient was on the street and called on me at the office, complaining of a difficulty about his heart. On examination found mitral regurgitation; also learned that for a year past he had suffered from vertigo; he dare not go on a ladder, or near the edge of the roof of a building. For this I placed him on green tincture of cereus bonplandii, 5 gtt. three times a day, and in three weeks he was entirely relieved. It is proper to add that the jacket poultices were changed but four times. The ligatures were kept on for three days with occasional loosening, that too much congestion might not occur.—C. H. Yelvington, M. D., in *Medical Eclectic*.

FURTHER USES OF CEREUS BONPLANDII.—The above is an extract from I. J. M. Goss' *Materia Medica*, just published at St. Louis, Mo.: "Cereus bonplandii is a species of the cactus, discovered some years ago by Bonpland in Central America, and is now found also in Mexico. This remedy is one of the best that I have found to mitigate the symptoms of hypertrophy and dilatation, and also a good remedy to quiet the irritability in valvular disease of the heart. It, like the cactus grandiflorus, has a specific affinity for the heart, and quells any undue excitement of that organ. I have given it in many cases of heart disease, and though it does not possess the power to cure a bad case of hypertrophy, or dilatation, yet it quiets the heart, and controls any undue excitement of that organ. In nervous or sympathetic palpitation, which is so frequently associated with female diseases, the bonplandii acts with great promptitude and certainty. I was called a few days ago to see a lady who was so troubled at night with dyspnoea and palpitation that she could not sleep. On examination I found the heart beating very forcibly, at the rate of 90 or 100 beats per minute. I examined the os uteri, which I found, in a state of

induration, and very much enlarged, with closure of the cervix to the size of the No. 1 or 2 bougie, with a ropy or leucorrhœal discharge from the internal surface of the uterus. She had been "physicked" for various diseases, but not for the disease she really had. She informed me her physician had treated her for anteversion, and then for prolapsus uteri, and finally said that she had nothing but hysteria. She could not sleep well, and was much troubled with palpitation and dyspnoea. I put her upon the bonplandii for her heart troubles, and proper treatment for the induration of the uterus, and she was soon relieved of her heart difficulties, and now sleeps soundly without any trouble with the palpitation or dyspnoea.

"A lady about 28 years of age, barren, but married for several years, consulted me for palpitation, and great dyspnoea at night. On examination I found the heart beating with unusual force, and at the rate of 90 or 100 per minute. I put her upon the tincture of bonplandii, which gave relief in a short time, and she appears to be recovering her health entirely. In this case there appeared to be no lesion of the uterus whatever, but simply an irritable heart, and the above is but two of the many cases that I am now treating with this new remedy, and they all seem to be very readily influenced by it. And while it does not cure hypertrophy or dilatation, it certainly very much lessens the suffering of the patient. It acts like cactus grandiflorus, but seems to be more powerful in its action. It is destined to become one of the most reliable heart remedies. It is much safer than digitalis, and equally as reliable in action."

KAVA.—M. Gubler (*Journal de Thérapeutique*, 10 février, 1878) reaches the following conclusions regarding this new remedy:

1. The kava root (*Piper methysticum*) possesses two orders of properties: the one, cephalic and inebriating; the other diuretic and blennostatic.

2. The kava drunkenness is *sui generis*, and does not resemble that of alcohol. Besides, the maceration, called *Ava*, is not submitted to alcoholic fermentation, and the preliminary mastication of the root, producing glucose, has no other result than that of giving to the aromatic liquor a sweetish and sugary taste.

3. Among the symptoms that may be denominated acute *avaïsme*, the most remarkable and one of the most important consists of a genesaic excitement which has its seat, not in the sexual organs, but in the nervous centers in which the reproductive instinct is vested. There is no priapism, but much erotism.

4. Besides, kava has the power of moderating the inflammatory condition of the genito-urinary organs, and of reducing or suppressing mucopurulent catarrh of the urethro-vesical mucous membrane, probably through an action at once diuretic and blennostatic.

5. The direct and topical anti-catarrhal action, is due to an oleo-resinous, balsamic substance, comparable to the terebinthines in general use.

6. The indirect diuretic and anti-catarrhal effect depend, in part, upon this oleo-resin, but especially on a neutral cristalloid called *kawahine*, and perhaps upon an unsought alkaloid, the presence of which would account very well for the peculiar drunkenness as well as for the modifications of circulation and secretion in the genito-urinary apparatus.

7. This dual action upon the genito-urinary organs assigns to kava a remarkable efficacy in urethritis during its most inflammatory period. It explains the success of this remedy in cases where the pure terebinthines have failed, and makes

explicable the utility of associating the peppers—notably cubeb, whose effects are analogous to those of kava, with the oleo-resin of copaiba, to secure a cure in acute or intense blennorrhagies.

8. The therapeutic employment of kava is all the more to be commended, as this aromatic remedy is not at all unpleasant, and its use gives rise to no digestive troubles.—*St. Louis Clinical Record*.

EUCALYPTUS IN DISEASES OF THE SCALP.—For the destruction of the various vegetable parasite affections which constitute a special class of diseases of the scalp, it is notorious that the eucalyptus destroys and retards the development of the spores and fungi vegetating in the hair follicles, more certainly than other drugs. Under its use it is not necessary to shave or cut the hair, as it can be used as a dressing. It is a rapid and certain agent in all scalp affections. It is also very useful in erysipelatos affections, destroying the bacteria present. A very remarkable incident, especially in inflammatory affections of the scalp, is the remarkable diminution of heat; and the more certain is this the stronger we apply it; so it is very satisfactory to know that in scalp diseases we have an energetic remedy in the eucalyptus, used as follows:

R. Bay Rum, Oss;
Tinct. Cantharides,
" Lobelia,
" Sanguinaria Canad., aa. ʒii;
Fl. Ext. Eucalyptus, ʒii to ʒiii.

Mix. Use as a dressing.

The eucalyptus made into an ointment forms one of the most efficient remedies, not only in parasite diseases of the scalp, but also in the same class of diseases of the skin; and in all modern works on dermatology this remedy will play an important part.—*Dr. C. W. Irwin, in Eclectic Medical Journal*.

VIBURNUM PRUNIFOLIUM IN MENSTRUAL DISORDERS AND IN THREATENED ABORTION.—Noticing through your journal of January, 1878, the good effects of viburnum prunifolium in the treatment of female diseases, I am tempted to speak of its remedial efficacy. I have been using it almost daily for the last four years to relieve females suffering from suppression of and painful menstruation, and have always found it useful where there was not serious organic disease of the womb. More especially can I extol its virtues in the treatment of the bad state of health consequent upon the change of life, for it is in those cases that it has been most useful in my hands. In profuse hæmorrhage during the critical period, it seems to answer better than the preparation of opium as a uterine sedative. Two years ago, I was called to a negress in premature labor; it was the sixth child in four years. She was about to miscarry. The habit of premature labors had become established. Opium had been used in her previous labors by other physicians, but without good effect. I put her upon a decoction of black haw, and, much to my surprise, quieted the womb; the children carried to full term; the periodicity was broken up, and she has never since miscarried.—*William Lewis Dinkins, M. D., in Virginia Medical Monthly*.

VIBURNUM PRUNIFOLIUM (BLACK HAW) IN CASES OF THREATENED ABORTION.—Recently I have administered the tr. in two cases of threatened abortion with complete success. In one case the patient was in her seventh month, and the contractions were frequent and powerful, but two teaspoonfuls of the strong tr., administered every

fifteen minutes, gave perfect relief within one hour. In the other case the patient was in her fifth month, and was promptly and entirely relieved of all her pains. Its influence in both cases seemed to be almost magical. I never was so much surprised and so agreeably disappointed in my life. Had I known the value of this medicine thirty-five years ago, I certainly could have saved the lives of one hundred children. I am fully satisfied that opium does but little, if any, good in many cases of threatened abortion, and in some cases I believe that it tends to facilitate rather than prevent abortion. I do hope that every physician will give it a trial promptly.—*D. J. Parsons, M.D., in Medical Brief*.

VIBURNUM OPULUS.—If any substitute could be found which would give relief in painful menstruation, very much might be accomplished toward stopping the fearful growth of the opium habit, which now stares us in the face. This habit numbers more females than males, and they generally point to their medical advisers as having prescribed opium for pain, and frequently this special kind of pain. If any agent can be found which will give sufficient relief to prevent the use of this potent drug (unfortunately as potent for evil as for good), very much is accomplished.

The natural order caprifoliaceæ has furnished us a medicine (viburnum prunifolium), which has only to be used to be appreciated. Dr. Phares, of Mississippi, gave its peculiar and almost specific sphere of action. So much confidence have I in it, after several years of clinical experience with it, that I was readily attracted by what I read from eclectic authorities of another of the same natural order caprifoliaceæ, viburnum opulus, high cranberry. For description of plant and history I refer you to "King's American Dispensatory," tenth edition, page 858. It is spoken of by all eclectic authorities as a powerful antispasmodic, and is popularly known as cramp bark; is said to be "very effective in relieving spasms and cramps of all kinds, as asthma, hysteria, cramps of limbs and other parts, in females." What especially attracted my attention was the confidence with which it was advised in certain varieties of painful menstruation. I quote the language: "I have used the viburnum opulus in many cases of neuralgic and spasmodic dysmenorrhœa, and have yet to meet with a single case where it has failed to cure." (Hale's Therapeutics.)

A few cases selected from my case book will show, in a clear point of view, its promptness and efficacy.

Colored woman, of thirty-five; never has borne children; general health excellent; works hard, as a washerwoman. Every month is regular in menstruation, but suffers tortures. Says "a something which looks like shreds or patches of flesh, comes with it." Will not be examined. Has neither time nor means for any treatment that will "lay her up." Has tried a variety of remedies, and nothing has given relief but opium, at the time, in some form. Gave viburnum opulus, three times a day for two weeks before menstrual period, and every half hour when period is on her. Reported to me four times, at intervals of one month, taking it regularly; suffering each month, but not taking opium, her pain not demanding it. She quit taking the viburnum and reported afterward that she had suffered as much as ever, and would not take any more of my medicine, as it did not cure unless she was always taking it. Since this was written, she has returned for the same remedy.

Miss A., young lady of twenty. Has, from commencement of menstrual life, suffered each month;

pains spasmodic; general health good; has the appearance of health; is subject to hysterical attacks; has been using opium in some form each attack, usually requiring three or four doses during the first twenty-four hours. Put her on viburnum three times a day during the whole interval, every half hour at the period. At the next menses after commencing treatment had no pain. Continuing treatment, but limiting it to two weeks before, she has passed five menstrual periods without pain. She persists in taking the medicine, as I assured her it could do no possible harm.

Mrs. —, aged twenty-two. Married two years; no children; had no trouble with menstruation until she was upset in a boat when menses were on her. Since has suffered each month. Viburnum used four months; has only slight uneasiness now, each month; has taken no medicine for several months.

Mrs. —, twenty-one years of age; four years married; has great pain since marriage, and never any before. Examination by speculum shows very much elongated neck; very small cervical canal. Had cervix dilated, by another medical adviser, and with temporary benefit. General health poor; very thin, constipated, and in very low spirits; used sponge tents immediately before each period, and prescribed viburnum, at the same time paying attention to general condition for three months. It is now twelve months since treatment; has her menses without pain; her general health is much better than it ever was before. She continued viburnum two months after local treatment was stopped.

Mrs. —, aged twenty-five; since 1876, when an abortion, on account of placenta prævia, was produced on her, she has suffered very much with spasmodic pain each month. Viburnum, two weeks before expected time, gave, first time, great relief; took it again before next period, and was entirely relieved.

Many other cases could be given, but these sufficiently illustrate some varieties of painful menstruation, and show that positive effects were produced by the drug. I feel confidence in predicting cure when the pain is spasmodic and neuralgic; palliation when it is congestive or pseudo-membranous. But not alone in painful menstruation have I found it useful. I am now attending a case of menorrhagia; one of the chief difficulties was the intense pain—"cramp," as she expressed it—in the region of the uterus and both ovaries. Opium, in any form, caused so much nausea, so completely took away all appetite, that I was compelled to think of something which might relieve her. I gave viburnum opulus. The paroxysms were as speedily relieved by it as by opium under similar circumstances. I have frequently witnessed the same relief follow its use in similar cases, where uterine pain was complained of, without any inflammation of the organ.

Mrs. — was suffering very intense, cramp-like pain over uterus and ovarian region. Four months ago aborted twins; since which she has had more or less hemorrhage. For three days in pain. To-day pain greatly increased; no fever. To have turpentine stupes; viburnum opulus every half hour; inject a quart of hot water into vagina twice daily. Her pain was very much moderated after a few doses. When I saw her next day she was free from pain, but very sensitive (over the whole region which had been painful) to touch. I made appropriate treatment for hemorrhage, and in a few days she was much better. *I believe that the reputation of excellent medicines is frequently ruined because of the inert drug used by, or the improper manipulation of, the manufacturer. The fluid*

extract of the plant did not give as satisfactory results as the tincture.

Dr. Piffard, of New York city, in the *Medical Record*, suggests that the *application of heat destroys the medical virtues of some plants*. My experience with tinctures, made from the green plant, of many drugs, is so pleasant, that I fully agree with Dr. P., and hope he may get some of his ideas incorporated into the next pharmacopœia. Dr. Thomas, of New York, says that "he who regards dysmenorrhœa as a disease, and applies to every case a uniform plan of treatment will rarely meet with success in its management;" a wise saying, which will apply to every disease.

You can scarcely treat any two cases of any disease alike. You must individualize each patient, and treat what is presented in that patient. I do not mean that viburnum can occupy any position as a cure-all. We must pay attention to the condition of the patient; correct by appropriate treatment what needs correction; use viburnum opulus to relieve the pain, as it does, and trust that, as we advance in our therapeutical knowledge, we can assign to it its true and legitimate mode of action. There are many cases of painful menstruation where we can discover nothing wrong; others, as young girls, where we are not allowed, and unless deemed absolutely necessary should not ask, to treat by examination, etc.; others that after we have examined and endeavored to correct all that is amiss, still suffer pain; in these cases try this remedy; see if it will prevent the pain at all, and save the opium drugging. I think that this medicine is worthy of further trial, and trust it may do for others what it has seemed to do for me—give relief to this class of sufferers, and possibly have prevented some of my patients from becoming slaves to the opium habit, or drifting into all kinds of quackery, hopeless of relief at our hands.—*Chas. H. Hall, A. M., M. D., in Med. and Surg. Reporter.*

MISTELOE AS AN OXYTOXIC.—About three years ago I was informed by my friend, Dr. W. H. Long, of Louisville, of the superior properties of viscum album (mistletoe) as an oxytoxic. I then determined at the first opportunity to try its merits. During last fall I had some leaves of the viscum album gathered, and I made an infusion. Not knowing the exact proportions, I made it according to the general rule of infusions, two ounces to the pint; but, not waiting for the leaves to dry, I used them green, and doubled the quantity.

CASE I.—November, 1877, Mrs. McC., mult., had advanced to the second stage of labor and there remained for several hours. Upon close examination I concluded that all that was wanting was an efficient action of the uterus. Having an eight-ounce bottle of the infusion in my pocket, I gave about one-third of it, and in twenty minutes I gave her another third; and in ten minutes more regular clonic contractions of the uterus began, and during the hour she was safely delivered of both infant and placenta.

CASE II.—December, 1877, Mrs. P., mult., advanced to second stage of labor and remained in that condition, according to the "granny's" statement, from noon till after dark, when I was sent for. After learning the facts in the case, I gave Mrs. P. four ounces of the infusion, and very efficient uterine contractions followed in twenty-five minutes. The pains recurred about every three or four minutes; yet, after an hour, seemingly no impression had been made upon the child's head. Upon closer examination I found an occipito-posterior position, which had missed the usual rotation of the occiput under the pubic arch. The occipito-

mental diameter corresponded with the anterior-posterior diameter of the cavity. The head seemed to be locked in this position, which prevented flexion, notwithstanding the continued and powerful contractions of the uterus. I introduced a pair of perineal forceps, and with slight traction and flexion dislodged the head from what seemed to be its locked position. The next pain was so powerful that the child and secundines were delivered at once. So, notwithstanding the delay after the dose of viscum, we see that it was not for want of action of the drug on the uterus.

CASE III.—January, 1878, Mrs. C., having suffered from menorrhagia for eight months, applied to me for relief. She stated that her menses recurred about every eighteen or twenty days, and that the discharge was very profuse during the first two days; said she was greatly weakened from the loss of so much blood; looked pale. I gave her one-ounce doses of the infusion, to be taken just before and during the next recurrence, and to continue it when her menses recurred out of time or too profusely. She reported herself a few weeks since as regular, and feeling much improved.

My short experience with the parasite is, that it acts more promptly and more decidedly as an oxytoxic than ergot. In the few cases that I have used it I have had none of the troublesome "after-pains" that are often observed when ergot has been given.

In administering ergot I never know whether to look for its oxytoxic effects or not, it is so uncertain; yet this may be a fault of the manufacturer. Be that as it may, I, for one, will herald the introduction of the new oxytoxic (viscum album) into our materia medica with much satisfaction, giving all due honors to its introducer, our friend, Dr. W. H. Long.—*Arthur G. Hobbs, M. D., in Louisville Medical News.*

YERBA REUMA.—From an extended acquaintance with the medical properties of this plant, I am more and more impressed with its value in nasal catarrh, leucorrhœa, gonorrhœa and dysentery. And not only is it valuable in diseases of mucous membranes, but I have been using it in fevers where alkaline treatment was called for. In such cases, cures have resulted from the use of tinct. yerba reuma unassisted by any other medicine.

In nasal catarrh I ordered the patient to snuff up, from the palm of the hand, three or four times per day, a teaspoonful of the following:

R. *Tinct. yerba reuma, f 3 i-ij.
M. Water, f 3 iv.

I have an account of eighteen cures of nasal catarrh, some years' standing, that resisted all previous treatment.

The tincture is made from eight ounces of the plant to one pint of 30 deg. alcohol. The tincture, in odor and taste, reminds one of catechu. Analysis shows a large per cent of chloride of sodium in the plant.

I have performed cures in leucorrhœa after such remedies as salicylic acid and permanganate of potash had entirely failed.

I have injected it in gonorrhœa with fine effect. It will be found of value in dysentery where the alkaline treatment is called for. In diarrhœa, with fever, calling for alkaline treatment, I have had success. I give you a case to illustrate the use I have made of it. Was called in to see a child, nine years old. For several days the child had been complaining—dull and sleepy. For the last two days had had from eight to ten operations daily from bowels, with vomiting of bilious matter.

Found tongue coated dirty white, pulse 110 and very weak, pupils dilated. Ordered:

R. *Tinct. yerba reuma, f 3 ij.
" aconite rad., f 3 ss.
Syrup orange peel, f 3 jss.
Water, f 3 ij.

M. Sig. Teaspoonful every three hours.

Twenty-four hours after, found patient much improved in every respect. Bowels had moved but four times since commencement of treatment. In three days able to be about.

In introducing to your readers this new remedy, I am satisfied that I am placing in the hands of my brother practitioners a medicine that will not disappoint them in the diseases I have mentioned.—*C. H. Adair, M. D., in N. Y. E. Medical and Surgical Journal.*

GRINDELIA SQUARROSA.—My knowledge of this plant as a medicine extends over a period of years. I have seen it used with success in domestic practice in Oregon, Idaho and Washington Territory as a remedy in "bilious" derangements. I have seen fine results follow an application of the bruised, soft portions of the plant, to foul wounds and ulcers.

Since its introduction to the profession, I have made use of it in torpid conditions of the liver and spleen, and have found it a good remedy. I am also using it externally in foul ulcers, and have come to believe it the equal, if not the superior of *grin. robus.* in such troubles. In asthma I have found a valuable remedy in *grin. squar.*, combined with tonics.

I will mention treatment in a few cases to illustrate my use of the remedy.

Mr. R., it was said, had phthisis. He had been under treatment two months. I was called in to see him. Found complexion sallow, conjunctiva tinged yellow, tongue at base and center covered with dirty brown fur; severe cough, with frothy sputa; pulse full and hard; obstinate constipation; urine scanty and high-colored; considerable enlargement of liver; respiration difficult and intercostal; complained of dull, heavy pain in right hypochondrium, and a burning pain below right clavicle. Prescribed as follows:

R. Spec. tinct. grindelia squar., one fl. ounce.
Norwood's tinct. verat., one fl. drachm.
Syrup aurant. cort., aqua, aa. one and a half fl. ounce.

M. S. Teaspoon doses every three hours during the day. Associated with this the elix. beef, iron and wine, two tablespoonsful between meals, and in middle of night, if awake.

Treatment continued three weeks, when patient was dismissed, cured.

Miss N., 12 years old, was anæmic. Had been sick several weeks with chills, which visited her with no regularity. Frequent attacks of epistaxis; dull heavy pain in head for most of time; appetite poor; considerable nausea at times; pain in left hypochondrium, with considerable enlargement of spleen; tongue coated pasty yellow; pulse fili-form. Prescribed the following:

R. Spec. tinct. grin. squar., five fl. drachms.
Spec. tinct. nux vom., one-half fl. drachm.
Ferri. carb., one drachm.
Syr. zingiber, one fl. ounce.
Aqua, two fl. ounces.

M. S. Teaspoonful every three hours during day.

* N. B.—The fluid extract may be substituted for the tincture, as more uniform and reliable. (Ed.)

Six weeks dismissed case, entirely well.

For external use, I recommend one part of spec. tinct. grin. squar. to four parts glycerine. A solid extract would be a good form for external use.

Let those who desire to try the remedy *be sure they get hold of the true article*, and I am satisfied they will conclude with me that grin. squar. is a valuable agent.

I advise careful inquiry as to the identity of the remedy, from a *knowledge that material is being put upon the market not true to name.*—C. H. Adair, M. D., in the *American Medical Journal*.

CASCARA SAGRADO AS A REMEDY IN CONSTIPATION.—Not long since I received through a friend a sample bottle of the above named drug in the form of fluid extract, manufactured by Parke, Davis & Co., of Detroit, Michigan, and was requested to give it a fair trial in torpidity of the bowels. I happened to have on hand at the time several cases that I thought would be favorable subjects for such a trial, and to which I at once administered the article. To avoid any uncertainty of the effects, I withdrew all other remedies, and gave the drug simply diluted with half glycerine and aromatic water, in teaspoonful doses, thrice daily. To my surprise and delight, I found that my patient soon began a rapid improvement, and continued to do so even after I had withdrawn the medicine for some time. It seemed to act as a special tonic to the gastro-intestinal track, and increase to a marked degree the glandular secretions.

The noticeable improvement in these cases while using cascara sagrado may be a simple coincidence, but I hardly think so, for I had them under observation for some time before administering the drug, and when withdrawn for a time and then repeated, the same effects were observed.

I shall not offer any theory as to its action, but may do so at a future time, when I have had further experience, and will then give my opinion as to its utility.

If cascara sagrado will but approach the expectations of those who have thus far tried it, and what is claimed for it, it will at no distant day become one of the standard preparations and a favorite with the profession—for the number of individuals who are troubled with constipation is very large, and apparently on the increase—as a result of immoderate use of active purgatives.

It has the advantage of being comparatively pleasant to take, and the dose required is but small, which is strongly in its favor; but unfortunately it is rather expensive.

Dr. J. H. Bundy, of Oakland, California, I believe was the introducer, or describer of its qualities, although it is known to have been freely used by the old Spanish residents on the Pacific coast.—D. M. Wick, M. D., in *Arkansas Medical Record*.

PENTHORUM SEDOIDES.—For the last two years I have used this agent in my practice in the treatment of catarrhal affections with marked success. If not the best, there is certainly no better agent in the materia medica as an internal remedy in catarrh of the respiratory tract. There are cases, however, of pharyngitis or throat disease of a catarrhal nature connected with phthisis and goitre in which it could not be expected to do more than palliate the symptoms. But in all other cases it can be considered a true specific.

In its use I have avoided combination with other agents that its merits might be better tested. Yet it is probable that it could be given with other agents in many cases to great advantage. In some cases of bronchitis and pharyngitis with cold

liver oil; in nasal catarrh with yellow dock or stillingia; and in catarrh of the intestines with ipecacuanha and demulcents. With proper local treatment, however, no other internal remedy is required in ordinary cases, and a cure will be greatly facilitated. Of late I have used the fluid extract of hydrastis (without alcohol); 15 drops to a teaspoonful of lukewarm water to be simply turned in each nostril, the head being held back, three times daily, with excellent results. Heretofore I had used an injection of hydrastis in the same manner. I direct that no force be applied in snuffing the liquid up the nose at the time of using or afterwards; that it is to be allowed to run back into the throat without hindrance. I think that this plan gives better results, besides being of less trouble than any other method of introducing remedies into the nasal cavity.

There is a peculiar form of dyspepsia in which the penthorum has proved valuable, the most uniform and characteristic symptom of which is an excessive excretion of the phosphates in the urine. There is usually also nervous irritability, inability to sleep for an hour or more in the latter part of the night, excitability, confusion of the mind in active mental application, and often a peculiar irritability of the bladder. Doubtless in this quite frequent ailment it would be advantageous to combine the penthorum with the hydrangea, eupatorium pureum, or helonias; since these latter agents often have a better effect when combined than single. I would suggest in this connection that this form of dyspepsia is caused by catarrh of the stomach.

On the whole I think it is evident that the penthorum sedoides will prove to be a standard and indispensable remedy to all progressive physicians.—Dr. G. L. Tinker, in the *Cincinnati Lancet and Clinic*.

PENTHORUM SEDOIDES.—This agent has been used, I dare say, by most physicians of our school, and yet we have not arrived at any special indication or settled upon any direct action of the remedy.

The plant may be known by the following description: Stem branched and angular above; leaves, rarely sessile, lanceolate, serrate, alternate; flowers, yellowish in second radiating racemes; calyx of 5 sepals united at base; petals, 5, 000; stamens, 10; capsule, of 5 united carpels, 5 angled, 5 celled, 5 beaked, dehiscent by an obliquely terminal valve; seeds many and minute; grows in wet places; 10 to 18 inches high; blooms from July to September.

Having used this remedy for the last two years, and observed its action in a number of cases, I feel confident that it acts upon mucous membranes in relieving congestion and chronic inflammation.

In such condition of the kidneys where there is an abundance of phosphates and mucous deposit in the urine, I have seen the best results and complete cures in from one to four months with this remedy.

In chronic vaginitis, by way of injection, I have found this superior to most, if not all, agents used for that purpose, having cured supposed uterine disease by injecting 3 ss with water, Oj once or twice daily.

Miss G., whose father I was treating over a year ago for chronic cystitis, was troubled with catarrh of long duration, and had been treated by some of the best physicians in and out of the city, as well as taking patent medicines without any benefit. Upon examination found chronic or catarrhal inflammation of the larynx, eustachian tubes and stomach; bowels inclined to constipation,

appetite poor, circulation sluggish, and some frontal headache, nearly deaf, so that I had to speak very loud and close to her ear to be understood. In this condition she had been for a number of months, gradually growing worse. She having lost confidence in medicine, her mother and myself with difficulty persuaded her to try once more, and I put her upon penthorum sed., 3 j, water and simple syrup aa. 3 ij. M. and filter, which she continued to take without any other medicine for two or three months, and was well, improving from the very first. I cite this one case to illustrate the action of this remedy in chronic catarrh.

In summing up I have come to the following conclusion in regard to the action of penthorum sedoides.

1. That it acts upon mucous membranes.
2. That mucous membrane must be in a state of chronic inflammation.
3. That it makes but little difference where in the human system this condition exists.
4. That it removes irritation and brings about a normal functional activity of mucous membrane.—*Dr. H. G. Gabel, in Am. Medical Journal.*

MUSK-ROOT AND GELSEMIUM IN ASTHMA.—The remedies that are efficacious in asthma are those that relax spasms, and induce contractility in the coats of vessels. Musk-root causes contraction of the muscular fibers of the arteries in such a manner as to stimulate a flow of blood, and still, under this, spasm yields. Gelsemium affects the muscular coat of the vessels in a different manner. Such remedies are indispensable in treatment, as a means of modifying and altering the pulmonary circulation. The essential cause of asthma is an exaggerated excitability of the spinal cord, impression on which provokes the reflex convulsions which constitute the paroxysm. Gelsemium acts upon the vessels of the cord and diminishes its excitability by making its circulation active. The musk-root, though powerfully antispasmodic, causes the bronchial vessels to contract, and aids in the production of a healthy action.

Nerves that perform their functions normally, must be supplied with healthy blood, rich in ozone. This is indispensable to the respiratory nerves, which do not provoke contraction, except upon excitation of the spinal cord through the vagus, the nerve which receives sensory impressions and conveys them to the medulla, where they are transformed into motor impulses, to the intercostal muscles and the diaphragm. Asthma is a spasm of the circular muscular fibers of the bronchia, intercostal muscles, and diaphragm; it is a tetanic contraction. In musk-root and gelsemium we have a means of overcoming this condition.—*Dr. J. Smith, in Eclectic Medical Journal.*

GELSEMIUM SEMPERVIRENS IN NEURALGIA.—The action of this drug in affections of a neuralgic character has recently been studied by Dr. Emery-Heroguelle, who made it the subject of his inaugural thesis. Taken in a large dose gelsemium produces frontal headache, stunning, visual troubles, diplopia, contraction of the pupil, and dropping of the upper eyelid, and also weakness of the legs. The author reports six cases of intoxication from this drug, taken in mistake. Gelsemium is administered in powder or in pills in the dose of three-fourths of a grain to three grains of the powder of the roots. It may also be given in the form of tincture, made with one hundred parts of alcohol at 60 deg. to five parts of the powdered root. The dose is from forty to eighty drops. A syrup may be also made by adding fifty parts of

the tincture to one thousand of simple syrup. M. Emery-Heroguelle reports thirty-one observations in reference to the action of the drug on neuralgia. From an analysis of the results, it appears that gelsemium may be especially looked upon as an anti-neuralgic; that it acts favorably in cases of dental neuralgia of the fifth pair, of the frontal, temporal, supra and infra-orbital nerves, the brachial plexus, the intercostal and ilio-lumbar nerves. Sciatic neuralgia appears to resist rather more than other neuralgias the calming effects of this tincture. The author considers gelsemium a powerful sedative in neuralgia, especially in those varieties which are not accompanied by local fluxion in the affected point.—*Medical Examiner, Dec. 27, 1877.*

EPILEPSY SUCCESSFULLY TREATED WITH SUMBUL.—The following case will be interesting to our readers, as an example of the failure of bromine, calabar bean and other remedies in the non-arresting of the recurrence of the fits:

Clara L., unmarried, 35, applied to me, suffering from epileptic fits. She said she had been liable to them since puberty, and that they had gradually increased in severity and frequency, coming on at first every twenty-eight days, and now as often as once a week. She loses all consciousness, falls down, struggles violently, bites her tongue and lips, exhibiting in fact all the usual phenomena of an epileptic fit, ending with sleep, from which she awakes with exhaustion. There is no *ama*, the attack comes on unexpectedly. Her appearance is chlorotic, health moderately good, menstruation normal. I tried the case on bromides fairly and squarely, and no result. I procured some fluid extract of sumbul (Parke, Davis & Co.), and gave her half-drachm doses every three hours with most satisfactory results. It is now three months since the remedy was first given, and not a single recurrence. So much for sumbul; but let me say a word—use Parke, Davis & Co.'s extract.—*Dr. Burchell, Chester, Pa., in Eclectic Medical Journal.*

QUINIDIA SULPHATE, when chemically pure, is almost a duplicate of quinia, and may be given in the same doses; it does not cause any more gastric troubles than quinia; even the commercial salt is as efficacious as quinia.

Cinchonidia sulphate is also closely allied to quinia in its effects, and may be given in the same doses; but it is more apt to cause nausea and vomiting, and even purging, than quinia or quinidia. This salt is not recommended in diseases of the genito-urinary system, or after operations on this tract; neither is it to be given when shock exists.

Cinchonia sulphate is a valuable antiperiodic, but must be given in larger doses than the other salts. It is quite apt to produce gastric disturbances and cause purging.

Thus it may be seen that the three alkaloids may be substituted for quinia; but that quinidia and cinchonidia are better substitutes for that salt.—*Dr. Newton in Medical Record.*

THE USE OF CAPSICUM WITH QUINIA.—It is not generally known that either capsicum, ginger, or other aromatics, combined with quinia, will make the patient more tolerant of large doses of this medicine, and obviate some of the disagreeable head symptoms apt to arise from its administration. Moreover, as Prof. Wm. H. Thompson has remarked, "a good dose of capsicum combined with twenty grains of quinine will act as well as thirty grains of quinine without the capsicum. Spices in general stimulate the portal circulation and promote the flow of bile, and hence their universal use in

hot climates. There is a tendency on the part of quinine and capsicum to purge, and sometimes to purge violently. In such cases the purgative action is caused by the increased flow of bile produced by the capsicum. Ginger and quinine when combined do not purge, and it makes a very good combination. The proportions should be one grain of capsicum to three of quinine; with ginger, one grain of each." In malarious climates capsicum should, if possible, be preferred, as it is in itself a good stimulant, and possesses antiperiodic properties. For years we have been in the habit of prescribing a little tincture of capsicum in an ordinary quinine mixture, with the view of preventing any slight giddiness or headache that might otherwise arise from its administration.—*Med. Press and Circular*.

A TASTELESS ANTIPERIODIC—(A substitute for "Cincho-Quinine," "Sweet Quinine," "Pyro-Quinine," and other nostrums).—Dr. S. Ashhurst (*American Jour. of Med. Sciences*, April), in order to overcome the difficulty of administering cinchonia on account of the bitter taste which is developed when, after the administration of the pure alkaloid, portions remaining in the mouth are dissolved by the salivary fluid, mixes the cinchonia with sugar of milk, and with some bicarbonate of soda, to neutralize free acid in the saliva. "A powder containing one grain of cinchonia, four grains of sugar of milk, and one-tenth of a grain of bicarbonate of sodium, possesses only the slightly sweet taste of the sugar of milk, and is quite readily miscible with water and milk; or, if preferred, can be easily swallowed dry."

Editor's Notes.

Mr. John D. Haskell, of Boston, called at our office, exhibiting a new invention called the Equilibrist Suspender, from the fact that it equally divides the weight of the pantaloons on the shoulders, in this respect differing greatly from the old style worn. It is wholly non-elastic, and when in a recumbent position every strap loosens, thus avoiding pulling off buttons. The back straps do not cross, which prevents the back buttons from being drawn together, causing the pantaloons to press heavily against the abdomen. Mr. Haskell is now introducing them through the Western

States, and they can be had from all first-class dealers in gentlemen's furnishing goods.

Please note correction on advertising page vi of July number: Dose of Fluid Extract Buckeye bark, should read, "From three to five drops four times a day."

DRUGGISTS will be interested in learning that a practical machine has been invented for filling empty gelatine capsules. We invite them to read carefully the description given on advertising page III.

Publisher's Notes.

SPECIAL NOTICE.—In response to the desire of a great number of physicians in all parts of the country, we have decided to issue NEW PREPARATIONS as a monthly, after the first of January next, and to increase its size and importance, as will be seen in our editorial columns.

We invite special attention to the prospectus of the new volume, giving our clubbing rates and list of premiums, and ask every physician interested in the advancement of medical science to help us increase our subscription list. We specially call the attention of worthy men out of employment, and of young men desirous of bettering their condition, to the fact that we want a smart, active agent in every State and county of the United States to work in our interests. To such persons liberal commissions will be paid. The work is easy, honorable, requires no capital, and *pays well*.

Write to us at once, stating your qualifications for canvassing; also what territory you want, and we shall be pleased to correspond with you.

We intend to make NEW PREPARATIONS the leading journal of its kind in the country, and ask the co-operation of all who have in the past found it of interest, in our efforts to increase largely its circulation and value.

For one dollar and fifty cents inclosed to Geo. S. Davis, Publisher, we will send NEW PREPARATIONS (monthly) and MICHIGAN MEDICAL NEWS (semi-monthly) for *one year* to any address.

CIRCULATION, 20,000 copies.

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BACK NUMBERS (1877-78), each 10 cents. Back numbers, bound—Vol. I and II—each vol.—paper 40 cents; board 75 cents.

If you have an unusually interesting case to offer, write its history in detail for the *Original Department*, to the extent of, say, two pages of foolscap.

If you wish merely to express your opinion generally on the merits of a new remedy, write for *Correspondence Department*, to the extent of a page of note paper or finely written postal card.

We should be pleased to have all who receive a sample copy of this number, continue with us, and hope they will send their remittances of one dollar

each in to us as speedily as possible, so that our mail list can be got in readiness for the next issue.

ANY inquiries you may wish to make concerning the action of any new drug, please to send to us; if we cannot readily answer it ourselves, we will give it publication. Some one out of our many thousand readers will undoubtedly be able to give you the information you wish.

WE shall continue the reports of practitioners upon the remedies introduced to your notice next year, and shall also continue our reports upon such other new-comers as may be of interest to the profession; hence we cordially invite physicians to send us, for publication, their written experience with any of the *new remedies* alluded to in our columns, or upon kindred subjects.

Miscellaneous Notices.

For Sale.

Drug store doing a paying business. Stock small and clean; fixtures nearly new. For particulars address

"PHARMACIST," P. O. box 641, Detroit, Mich.

For Sale.

A good drug store, in a lively town of 6,500 inhabitants; rich country surrounding; best location in town, on corner and central. Will invoice \$3,300 to \$3,600. Will give a bargain. Owner wants to quit business and attend college.

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A drug store in one of the best business locations in the city of Detroit is now offered for sale. The proprietor is compelled by urgent personal reasons to close up his business within a brief period, and will offer stock, fixtures and good will at very reasonable figures. Part cash is asked, and easy terms for the balance, if good security can be given.

Any one with available funds will find a bargain in a cash purchase.

The store is well stocked with every requisite for a first-class store, and is in excellent condition.

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Read carefully the article on this subject on advertising page I. Physicians are requested to examine Parke, Davis & Co.'s capsules in comparison with others in the market.

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PARKE, DAVIS & CO.

Quinine Flower.

An antiperiodic of undoubted merit, producing all the effects of quinine, even to the *tininitus aurum*. See advertising page V.

PARKE, DAVIS & CO., Detroit.

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Parke, Davis & Co. have made many improvements in these elegant pharmaceuticals. Their list comprises all standard formulæ, as well as the most recent combinations of new remedies. Physicians will insure satisfaction, and encourage quality in manufacture by specifying "P., D. & Co.'s" on their prescriptions.

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These granules are intended to supply the need of physicians in such cases as require minute doses, or frequent repetition, for adults, or in complaints of children. For the sake of beauty of appearance, and to distinguish them from the regular line of pills, a coating of pink sugar is applied. Specify "P., D. & Co.'s Pink Granules" on your orders.

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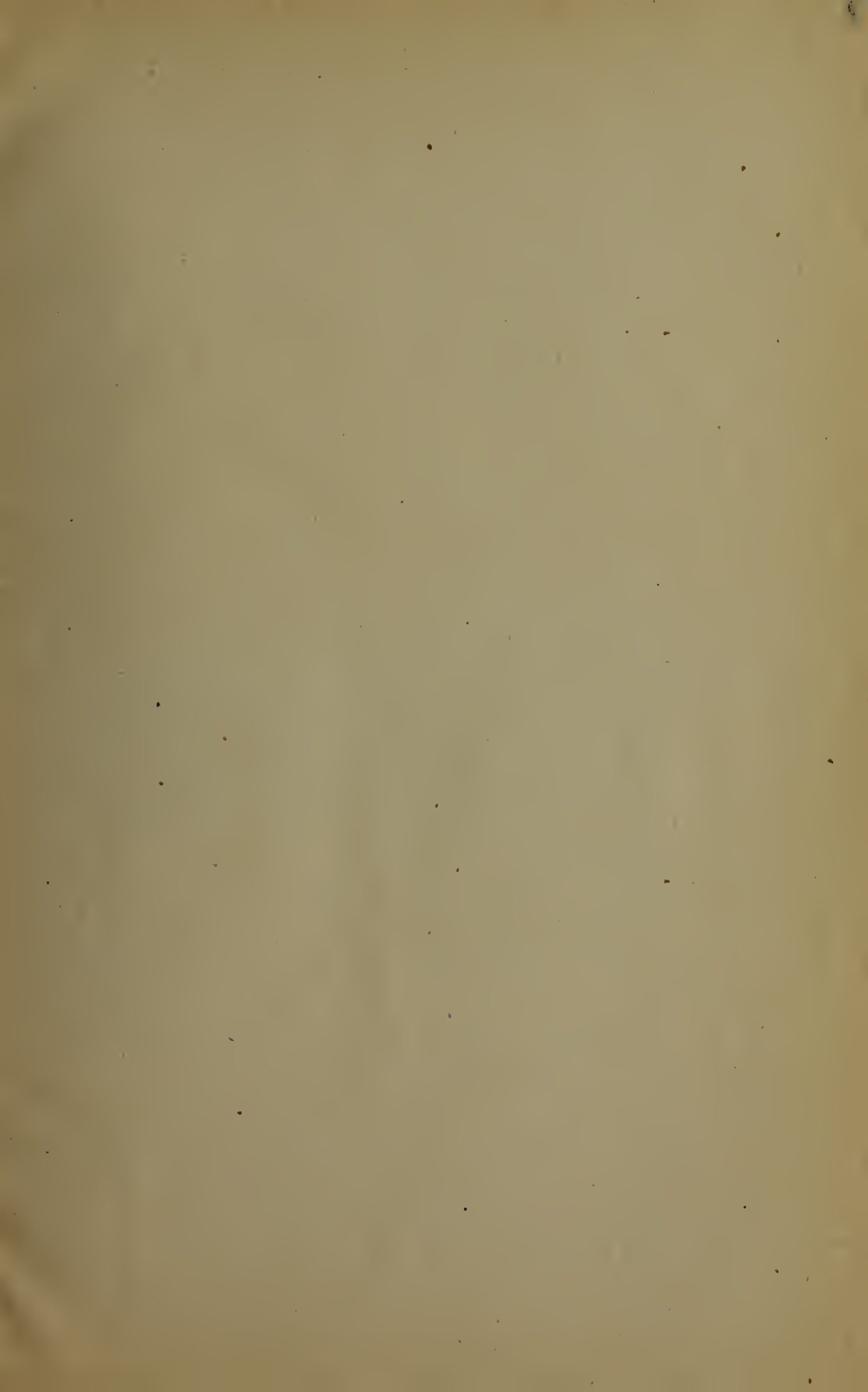
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